

Prison Rape Elimination Act (PREA) Audit Report

Adult Prisons & Jails

☐ Interim ☒ Final

Date of Report April 20, 2020

Auditor Information

Name: Cynthia Malm	Email: cmalm@idahosheriffs.org
Company Name: Idaho Sheriffs' Association	
Mailing Address: 3100 Vista Ave., Ste. 203	City, State, Zip: Boise, Idaho 83705
Telephone: 208-346-1065	Date of Facility Visit: September 16 – 18, 2019

Agency Information

Name of Agency: Clearwater County Sheriff's Office		Governing Authority or Parent Agency (If Applicable): Clearwater County	
Physical Address: 150 Michigan Ave.		City, State, Zip: Orofino, ID 83544	
Mailing Address: P.O. Box 724		City, State, Zip: Orofino, ID 83544	
Telephone: 208-476-8903		Is Agency accredited by any organization? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
The Agency Is:	<input type="checkbox"/> Military	<input type="checkbox"/> Private for Profit	<input type="checkbox"/> Private not for Profit
<input type="checkbox"/> Municipal	<input checked="" type="checkbox"/> County	<input type="checkbox"/> State	<input type="checkbox"/> Federal

Agency mission: It will be the mission of the Clearwater County Sheriff's Office to provide a safe and friendly environment by working with the people who make up our communities.

Clearwater County shall be a place where visitors are welcome, where children can grow, families thrive and elderly retire. Furthermore, the Clearwater County Sheriff's Office shall be available to the public for help in a cooperative effort in solving their problems in the community and at home.

The staff of the Clearwater County Sheriff's Office believes trust, credibility, and honesty are our greatest and most sacred attributes. We are committed to providing positive role models who are active members of their communities.

It is the responsibility of the Clearwater County Sheriff's Office to protect and promote this positive working environment for its staff and volunteers while fostering working relationships with other

agencies so the community receives the most beneficial and cost effective service for the people who reside in and travel through Clearwater County.

Agency Website with PREA Information: clearwatercounty.org

Agency Chief Executive Officer

Name: Chris Goetz

Title: Sheriff

Email: cgoetz@clearwater.org

Telephone: 208-476-4521

Agency-Wide PREA Coordinator

Name: Ryan Spiekerman

Title: Corporal

Email: rspiekerman@clearwatercounty.org

Telephone: 208-476-8903

PREA Coordinator Reports to: Lt. Sheri Busta

Number of Compliance Managers who report to the PREA Coordinator None

Facility Information

Name of Facility: Clearwater County Jail

Physical Address: 150 Michigan Ave., Orofino, ID 83544

Mailing Address (if different than above): P.O. Box 724, Orofino, ID 83544

Telephone Number: 208-476-8903

The Facility Is:

☐

Military

☐

Private for profit

☐

Private not for profit

☐

Municipal

☒

County

☐

State

☐

Federal

Facility Type:

☒

Jail

☐

Prison

Facility Mission: It is the mission of the Clearwater County Jail to provide a safe and secure confinement for lawfully committed inmates or detainees in compliance with standards set forth by the Idaho Code and the Idaho Jail Standards. The primary goal of the jail will be to provide for the safety of Clearwater County citizens by detaining lawfully committed inmates in the most efficient and cost-effective manner as possible.

The jail will be managed in a manner that will foster a positive atmosphere between the staff and inmate population with the expectation that mutual respect will be displayed at all times. This will be accomplished by employing well-trained and motivated jail staff, maintaining a safe and secure physical plant and providing inmate programs that will offer them an opportunity to help prepare

themselves for eventual reintegration into their communities. Inmates will be held accountable for their actions. Incentive for good behavior is provided through a classification system that will reward positive behavior. We will strive toward the goal that inmates will leave this facility in at least the same, and preferably better, condition as when they arrived.

Facility Website with PREA Information: www.clearwatercounty.org

Warden/Superintendent

Name: Sheri Busta	Title: Jail Administrator/Lieutenant
Email: sbusta@clearwatercounty.org	Telephone: 208-476-8903

Facility PREA Compliance Manager

Name: None	Title: Click or tap here to enter text.
Email: Click or tap here to enter text.	Telephone: Click or tap here to enter text.

Facility Health Service Administrator

Name: Jami Tyler	Title: Nurse Practitioner
Email: Click or tap here to enter text.	Telephone: 208-827-0864

Facility Characteristics

Designated Facility Capacity: 31	Current Population of Facility: 8		
Number of inmates admitted to facility during the past 12 months			533
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 30 days or more:			35
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 72 hours or more:			225
Number of inmates on date of audit who were admitted to facility prior to August 20, 2012:			0
Age Range of Population:	Youthful Inmates Under 18: 0	Adults: 18 to 85	
Are youthful inmates housed separately from the adult population?		<input type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Number of youthful inmates housed at this facility during the past 12 months:			0
Average length of stay or time under supervision:			N/A
Facility security level/inmate custody levels:			Minimum, Medium, Maximum, Protective Custody
Number of staff currently employed by the facility who may have contact with inmates:			9
Number of staff hired by the facility during the past 12 months who may have contact with inmates:			6
Number of contracts in the past 12 months for services with contractors who may have contact with inmates:			1

Physical Plant

Number of Buildings: 1	Number of Single Cell Housing Units: 0
Number of Multiple Occupancy Cell Housing Units:	6
Number of Open Bay/Dorm Housing Units:	0
Number of Segregation Cells (Administrative and Disciplinary:	Click or tap here to enter text.

Description of any video or electronic monitoring technology (including any relevant information about where cameras are placed, where the control room is, retention of video, etc.):

The Clearwater County Jail uses wired DVR recorders for video surveillance of its inmates. There is night vision but no audio capability. There is no control room at this facility.

Each cell has two cameras; one for the day room and one for the dorm room. One camera is in the Inmate Worker cell, two in the main hall, two in the booking area, one on each side of the visitation area, one in the recreation yard, one in the library, and one each in the interview and holding cells. There is no camera in the shower room.

Video retention is approximately 14 days.

Medical

Type of Medical Facility:	In-House
Forensic sexual assault medical exams are conducted at:	Clearwater Valley Hospital in Orofino, ID

Other

Number of volunteers and individual contractors, who may have contact with inmates, currently authorized to enter the facility:	1
Number of investigators the agency currently employs to investigate allegations of sexual abuse:	2

Audit Findings

Audit Narrative

The auditor's description of the audit methodology should include a detailed description of the following processes during the pre-onsite audit, onsite audit, and post-audit phases: documents and files reviewed, discussions and types of interviews conducted, number of days spent on-site, observations made during the site-review, and a detailed description of any follow-up work conducted during the post-audit phase. The narrative should describe the techniques the auditor used to sample documentation and select interviewees, and the auditor's process for the site review.

The Prison Rape Elimination Act (IPREA) on-site audit of the Clearwater County Jail in Orofino, Idaho was conducted on September 16 - 18, 2019 by Cynthia Malm from Pocatello, Idaho, a U.S. Department of Justice Certified PREA auditor for adult facilities. Pre-audit preparation included a thorough review of all documentation and materials submitted by the facility on a flash drive along with the data included in the completed IPREA Pre-Audit Questionnaire. The auditor reviewed documentation that included agency policies and procedures, forms, education materials, training curriculum, organizational charts, mission statements, posters, inmate handbooks, flyers, website information, and other IPREA related materials that were provided to demonstrate compliance with the IPREA standards. This review prompted a series of questions that were noted on the auditor's compliance tool and the auditor posed the questions to the Jail Administrator and the IPREA Coordinator at the on-site audit.

An entrance meeting was held with Lt. Sheri Busta, Jail Administrator at 8:30 a.m. on September 16, 2019. Lt. Busta provided the auditor a list of all staff of the facility and their schedules, including specialized staff, and a list of all of the inmates in the facility and where they were housed. The auditor explained the process of the audit and answered any questions the agency had about the audit process.

During the three days of the on-site audit, the auditor was provided a private room outside the secure perimeter from which to work and conduct confidential interviews with staff. The auditor was also provided a private room within the secure perimeter to conduct confidential interviews of inmates. Formal personal interviews were conducted with specialty staff, random facility staff, randomly selected inmates, and contract employees. There were eleven inmates in the facility at the time of the interviews. Five of the inmates had been in the facility for a very short time and didn't have enough information to provide the auditor and one inmate refused to be interviewed. The auditor interviewed a total of five inmates who were available from the eleven inmates and were able to discuss the IPREA policies and procedures. There were no youthful, gay, lesbian, bisexual, transgender, limited English proficient, or disabled inmates incarcerated in the facility to interview. No inmates had reported sexual abuse in the community or an institution at intake and none reported sexual abuse to the auditor. There were no inmates in segregated housing who had been a victim of sexual abuse for the auditor to interview. Inmates were interviewed using the recommended DOJ protocols that question their knowledge of a variety of IPREA protections, generally and specifically, their knowledge of reporting mechanisms available to inmates to report abuse or harassment. All of the inmates the auditor interviewed acknowledged that they had received training on IPREA at booking, or shortly after, in the form of a flyer explaining their right to be free from sexual abuse and sexual harassment, their right to be free from retaliation for reporting a sexual abuse or sexual harassment, and how to report a sexual abuse or sexual harassment. All inmates stated there are posters everywhere that explain their rights against sexual abuse and sexual harassment and how to report an incident. The inmates confirmed that IPREA education is given at least every thirty days after booking. The majority of the inmates stated that the deputies treat them well in the Clearwater County Jail and were very positive about their treatment and stay in the facility.

The auditor interviewed six staff members representing two-day shifts (3:00 a.m. to 3:00 p.m. and 9:00 a.m. to 9:pm and two-night shifts, 3:00 p.m. to 3:00 a.m. and 9:00 p.m. to 9:00 a.m.) The facility has nine total staff members assigned to it, and one was the Jail Administrator and one was the IPREA Coordinator who had several sets of questions that needed to be answered. The auditor also interviewed three specialty staff, including a shift supervisor, one medical provider (contract staff), and one investigative staff. Clearwater County Jail is a small facility so the detention deputies do all of the jobs in the facility and are not designated to individual specialty jobs. Therefore, the auditor divided the specialty questions among the staff. Also interviewed were the Sheriff, the Jail Administrator and the IPREA Coordinator. Staff were interviewed using the DOJ protocols that question their IPREA training and overall knowledge of the agency's zero tolerance policy, reporting mechanisms available to inmates and staff, the response protocols when an inmate alleges sexual abuse or sexual harassment, and first responder duties. There are no SAFE or SANE employees at the facility as they are made available at Clearwater Valley Hospital in Orofino, Idaho. All staff were very knowledgeable about IPREA and their responsibilities in preventing, detecting, and reporting sexual abuse and sexual harassment. All confirmed that they have some training on those responsibilities. The auditor reviewed random staff training records, rosters for attendance at PREA/IPREA training and the curriculum taught at the training to determine compliance with training mandates. Case files for seven inmates in the facility were reviewed to evaluate screening and intake procedures, inmate education, and inmate signatures of acknowledgement. All inmates are given a PREA video to watch during the intake process but only three of the seven inmates showed in the records that they had been given the video to watch. Classification records of inmate education, risk assessments, and housing decisions were also reviewed.

Following the entrance meeting, the auditor toured the facility from 10:00 a.m. to 10:50 p.m. and was escorted by Lt. Sheri Busta, the Jail Administrator. During the tour, the auditor reviewed the booking process, observed the facility configuration, camera and mirror placement throughout the facility, blind spots, staff placement for supervision of inmates, toilet and shower areas, notices of the audit posted throughout the building and documentation to assist in determining compliance with the standards. The auditor noted that shower areas allow inmates to shower separately and shower stalls have metal partitions and shower curtains hung for privacy. There are also sheets hung outside the shower to allow inmates privacy when dressing and undressing. Toilets are inside the individual cells and sheets are hung so that inmates can pull them closed when they are using the toilet and then open them again when done. Staff are announcing when they enter units of the opposite gender but can hear someone in the shower and see if someone is using the toilet. At that point, staff avoid the areas where they can see the inmate in the shower or on the toilet or they leave the housing unit and return later. The auditor reviewed the camera views and verified that toilets and showers were not monitored by the cameras. Three blind spots were identified in the facility that will need to be fixed. The first blind spot is in the kitchen pantry where there is no camera and no view of what is happening in the pantry. An inmate works in the kitchen and sometimes staff and the inmate are in the pantry at the same time. Several options were discussed to fix the blind spot including adding a camera in the pantry or creating policy that does not allow two people in the pantry at the same time and fixing the camera views at the ends of the hallway so deputies and inmates can be seen standing outside the open door. The second blind spot was in the laundry room where there is no camera. This can easily be fixed by creating policy that prohibits more than one person being in the laundry room at a time and verifying the camera views at both ends of the hallway can see who enters the laundry room. And, the third blind spot is in the clothing storage but the same change in policy and camera views from the ends of the hallway would fix this. Notices of the IPREA audit were posted throughout the facility in the housing units and were posted on August 15, 2019. During the tour, the auditor was given privacy to talk informally to staff and inmates in the booking room, housing units, program areas, and work areas. The auditor interviewed staff members working their posts to ask questions about their positions, procedures in their areas, and how their areas contributed to protection from sexual abuse and sexual harassments.

Throughout the three days of the audit, the auditor reviewed questions noted on the auditor's compliance tool with Lt. Sheri Busta, the Jail Administrator and Cpl. Ryan Spiekerman, the IPREA Coordinator, and viewed the documentation to verify compliance with the standards.

At the conclusion of the on-site visit, an exit meeting was held at 3:20 p.m. on September 18, 2019 between the auditor, Lt. Busta, and Cpl. Spiekerman to discuss the audit findings and possible corrective actions that could be taken by the facility to achieve compliance with the standards that were not met.

Facility Characteristics

The auditor's description of the audited facility should include details about the facility type, demographics and size of the inmate, resident or detainee population, numbers and type of staff positions, configuration and layout of the facility, numbers of housing units, description of housing units including any special housing units, a description of programs and services, including food service and recreation. The auditor should describe how these details are relevant to PREA implementation and compliance.

The Clearwater County Sheriff's Office operates and maintains the Clearwater County Jail, located at 150 Michigan Avenue; Orofino, Idaho 83544. The Clearwater County Jail is a linear detention facility with a rated capacity of 31 beds, but an operational maximum of 27 beds including one inmate worker (provided by IDOC). The jail houses adult male and female inmates; juveniles are transported to the juvenile detention center in Lewiston, Idaho. The jail has three general purpose cells, one general population cell, one maximum security (lock-down) cell, and one cell reserved for use by the inmate worker.

The Clearwater County Jail, consisting of one building, is relatively small and consists of a main hallway from which each cell is on the north side. The cells each contain several beds located in the dormitory half of the cell with the day room separated by a sliding barred gate. Each cell also has a walkway for the deputies to traverse and observe everything in the cell. Cells 1, 2, and 3 each have five beds, a day room, two toilets (one in the dorm area and one in the day room), a shower, and one phone. Cell 4 has the same configuration but with eight beds and two phones. Cell 5 has three individual cells (each of which can be separately locked), four toilets (one in each cell and one in the day room), a shower, and one phone. Cell 6, on the south side of the hallway, has five bunks, a phone, and a complete bathroom. All cells have cameras allowing the Detention Deputies to observe movement and activity in the cell without infringing on the inmates' rights to privacy.

All new arrests are introduced through a secure sally port, and are led to the holding cell (or interview room if necessary) where they will be pat searched for contraband. Unless there are exigent circumstances there are to be no cross-gender pat searches or cross gender visual body searches. Once the safety and security of the jail are assured, the Detention Deputies begin the booking and classification process to ensure the inmate is placed in an appropriate cell relevant to his or her classification level, PREA inclinations, or protective custody restrictions. Classifications may be over-ridden by administrative staff with cause and should be recorded.

As for the external security of the Jail, there are cameras positioned throughout the inside and outside of the courthouse. The Detention Deputies frequently observe the cameras to ensure proper inmate conduct in the facility and our dispatchers assist with the task of observing the monitors. If a situation arises in the Jail, the Detention Deputies are equipped with radios to call for patrol assistance and to inform dispatch of the situation. Dispatch is able to communicate and coordinate further while the Detention Deputies respond to the incident.

Summary of Audit Findings

*The summary should include the number of standards exceeded, number of standards met, and number of standards not met, **along with a list of each of the standards in each category**. If relevant, provide a summarized description of the corrective action plan, including deficiencies observed, recommendations made, actions taken by the agency, relevant timelines, and methods used by the auditor to reassess compliance.*

Auditor Note: No standard should be found to be “Not Applicable” or “NA”. A compliance determination must be made for each standard.

Number of Standards Exceeded: 3

115.41, 115.42, 115.73

Number of Standards Met: 40

115.11, 115.12, 115.14, 115.15, 115.16, 115.17, 115.18, 115.21, 115.22, 115.31, 115.32, 115.33, 115.34, 115.35, 115.43, 115.51, 115.52, 115.53, 115.54, 115.61, 115.62, 115.63, 115.64, 115.65, 115.66, 115.67, 115.68, 115.71, 115.72, 115.76, 115.77, 115.78, 115.81, 115.82, 115.83, 115.86, 115.87, 115.89, 115.401, 115.403

Number of Standards Not Met: 0

Summary of Corrective Action (if any)

115.11(b) requires the agency to designate an agency-wide IPREA Coordinator who has sufficient time and authority to develop, implement, and oversee the agency efforts to comply with the IPREA standards. The organizational chart does not show the position of the IPREA Coordinator in the agency or who the Coordinator reports to. The Clearwater County Jail, in consultation with the Clearwater County Sheriff, will add the position of the IPREA Coordinator to the organizational chart and who the Coordinator reports to in order to show the Coordinator has authority to develop, implement, and oversee agency efforts to comply with the IPREA standards. The revised organizational chart will be sent to the auditor within 180 days of the date on this interim report.

Successfully corrected on April 17, 2020

115.12(c) requires the facility to develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring to protect inmates against sexual abuse. The Clearwater County Jail has done a good job of placing cameras around the building to prevent blind spots but there are still three significant blind spots in the facility. The blind spots are in the kitchen pantry, laundry room, and clothing storage room.

The Sheriff and the Jail will look at placing cameras in the pantry to relieve that blind spot, revising policy to prohibit more than one person in each room at the same time, or consider other means that will correct the blind spots. These corrections will be sent to the auditor within 180 days of the date of this interim report.

Successfully corrected on April 17, 2020

115.16(a) requires the agency to establish policies and appropriate steps to ensure that all inmates, including inmates with disabilities or inmates who are limited in English proficiency, have equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The Clearwater County Jail does not have anything in policy to ensure this. The Clearwater County Jail reported it has procedures in place to deal with most disabilities and limited English proficient inmates but has nothing in place to communicate with deaf inmates. The agency will look at obtaining an agreement with sign language interpreters for communication and IPREA education. The agency will also create policy and procedures that explain what is being done to provide these services to all inmates, including deaf inmates. This corrective action will be completed within 180 days of the date of this interim report and the documentation sent to the auditor.

Successfully corrected on April 17, 2020

115.17(f) requires the facility to ask applicants and employees who may have contact with inmates directly about previous misconduct in either hiring applications, interview and hiring boards, or in self-evaluations. The Clearwater County Jail Policy states that it will do this. However, there is nothing in place for regular disclosures at yearly PREA training, self-evaluations, hiring boards, promotion boards, or other avenues. The Clearwater County Jail will amend its policy to specifically require when the questions will be asked of potential and current employees and will develop procedures to ask the questions in the yearly PREA training and on self-evaluations as well as hiring and promotion boards. If the questions are not in the written application for hire and are not going to be put in the application, that process should be deleted from the policy. The Clearwater County Jail will send the amended policy and documentation confirming procedures are in place to the auditor within 180 days of the date of this interim report.

Successfully corrected on April 20, 2020

115.17(h) requires the facility to provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work. The Clearwater County Jail will add this to policy along with procedures of how this will be done and will send the revised policy to the auditor within 180 days of the date of this interim report.

Successfully corrected on April 17, 2020

115.21(a-b) requires that when conducting a sexual abuse investigation, the agency investigators follow a uniform evidence protocol. The Clearwater County Jail could not provide the protocol to the auditor. The Jail should locate the written protocol that is used by the agency or write out the procedures that are done to collect evidence in a sexual abuse investigation. The Clearwater County Jail will send the protocol to the auditor within 180 days of the date of this interim report.

Successfully corrected April 17, 2020

115.31(a-b and d) requires that staff receive initial training on PREA that includes ten subjects and then receives refresher training on those subjects at a minimum of two years and in the off years staff are given information on current sexual abuse and sexual harassment policies. The standard also requires that documentation is maintained on the training and the staff signs acknowledgement and understanding of the training. The Clearwater County Jail has not maintained documentation of this training and nothing is in policy to ensure this training is done on a regular basis. The Clearwater County Jail will revise policy to ensure how often this training is given, will have all staff take the NIC online course, "PREA: Your Role Responding to Sexual Abuse" or comparable training, and will maintain documentation of each employee acknowledging taking the class and understanding of the class. The revised policy and verification that all detention deputies have taken the training will be sent to the auditor within 180 days of the date of this interim report.

Successfully corrected April 17, 2020

115.32(a-c) requires the facility to train all volunteers and contract employees in their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures. The standard also requires that volunteers and contract employees sign acknowledgement that they received the training and understand the training. The Clearwater County Jail has not trained volunteers or contract employees in their responsibilities under IPREA. The Clearwater County Jail will develop a training guideline or curriculum and will train all volunteers and contract employees in their responsibilities under PREA and will have them sign acknowledgement of the training and understanding of the training. The training guideline and training acknowledgements will be sent to the auditor within 180 days of the date of this interim report.

Successfully corrected April 17, 2020

115.33(d) requires the agency to establish appropriate steps to ensure that all inmates, including inmates with disabilities or inmates who are limited in English proficiency, have equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The Clearwater County Jail has nothing in place to educate or communicate with deaf inmates. The agency will look at obtaining an agreement with sign language interpreters for communication and IPREA education. The agency will also add to policy exact procedures of how to communicate with inmates who are deaf. This corrective action will be completed within 180 days of the date of this interim report and the documentation sent to the auditor.

Successfully corrected April 17, 2020

115.35 requires the facility to provide specialized medical training to all part-time and full-time medical practitioners who work regularly at the facility and maintain documentation of the training. The policy does require this training and documentation and the Medical Provider confirmed that the Provider has knowledge of the four specific requirements of the training. The Provider is never left alone with the inmates and does not do private exams. The Clearwater County Jail will develop a training guideline or curriculum and will train all contract staff in their responsibilities under PREA and will have them sign acknowledgement of the training and understanding of the training. The Jail will send the documentation to the auditor within 180 days of the date on this interim report.

Successfully corrected on April 17, 2020

115.41(d) requires the intake screening shall consider certain criteria to assess inmates for risk of sexual victimization or sexual abusiveness. The Clearwater County Jail screening forms consider mental or physical disability but not developmental. The screening form does not consider whether the inmate has been previously incarcerated, or whether the inmate's criminal history is exclusively non-violent. The screening form asks if the inmate has ever been sexually abused in an institution but doesn't ask about in the community. The screening form also does not consider prior convictions for violent offenses or prior violence or sexual abuse as known to the agency to identify potential abusers. The Clearwater County Jail will add the missing items to the screening form. The revised form will be sent to the auditor within 180 days of the date of this interim report.

Successfully corrected on April 17, 2020

115.51(b) requires the facility to have at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency. The Clearwater County Jail has listed in policy the YWCA and the Orofino Police Department. The YWCA may not be able to pass the report on to the Jail if the inmate insists on confidentiality and no verbal or written agreement has been entered into with the Orofino PD to take these reports. The facility will find an outside agency, or agencies, that will agree to accept sexual abuse reports from inmates and immediately, upon receipt, relay the report to the Clearwater County Jail. The facility will make the calls to the agency free and unmonitored calls and will provide the contact information to the inmates. The Clearwater County Jail will revise policy so that it lists only agencies that have agreed to take these reports. Documentation and verification that the corrective action has been completed will be sent to the auditor within 180 days of the date of this interim report.

Successfully corrected on April 17, 2020

115.78(e-g) requires several items in policy including “the agency may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact”, “for the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation”, and “an agency may, in its discretion, prohibit all sexual activity between inmates and may discipline inmates for such activity but an agency may not deem such activity to constitute sexual abuse if it determines that the activity is not coerced.” The Clearwater Jail will add the three requirements to its IPREA Policy and will send the revised policy to the auditor within 180 days of the date of this interim report.

Successfully corrected on April 17, 2020

115.81(c) requires the facility to ask the inmate during risk screening if the inmate has experienced prior sexual victimization whether it occurred in an institutional setting or in the community. The Clearwater County Jail’s IPREA Policy asks if the inmate has experienced prior sexual abuse in an institution but doesn’t ask about the community. The Clearwater County Jail will add the term “community” to the question on the screening form and will send the revised screening form to the auditor within 180 days of the date of this interim report.

Successfully corrected on April 17, 2020

115.87(a) requires sexual abuse data is collected on every allegation of sexual abuse and will be documented on a standardized instrument and the incident-based data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice. The Clearwater County Jail has this in policy but does not have a standardized form in place to collect this data. The Clearwater Jail will use the actual survey of sexual violence form from the Department of Justice to collect this data and will send a copy of the form to the auditor within 180 days of the date of this interim report.

Successfully completed on April 17, 2020

PREVENTION PLANNING

Standard 115.11: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

All Yes/No Questions Must Be Answered by The Auditor to Complete the Report

115.11 (a)

- Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment? ☒ Yes ☐ No
- Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment? ☒ Yes ☐ No

115.11 (b)

- Has the agency employed or designated an agency-wide PREA Coordinator? ☒ Yes ☐ No
- Is the PREA Coordinator position in the upper-level of the agency hierarchy? ☒ Yes ☐ No
- Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?
☒ Yes ☐ No

115.11 (c)

- If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.) ☐ Yes ☐ No ☒ NA
- Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)
☐ Yes ☐ No ☒ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.11(a) The Clearwater County Jail has implemented a zero-tolerance policy as detailed in the IPREA Policy which comprehensively outlines the agency's approach to preventing, detecting, and responding to all forms of sexual abuse and sexual harassment. The policy contains necessary definitions and descriptions of the agency strategies and responses to sexual abuse and harassment. And, the policy details what sanctions are imposed for those found to have participated in prohibited behaviors. This policy forms the foundation for the program's training efforts with inmates, staff, volunteers, contractors, and others. All interviews reflected that staff and inmates are aware of this zero-tolerance policy.

115.11(b) The facility has designated an upper-level, agency-wide IPREA Coordinator to oversee policy and procedure development and operations in reference to sexual abuse and sexual harassment. The IPREA Coordinator is Cpl. Ryan Spiekerman. Cpl. Spiekerman indicated that he did have sufficient time and authority to complete all the tasks of the IPREA Coordinator. Sheriff Chris Goetz confirmed that Lt. Busta and Cpl. Spiekerman have full support of the Clearwater County Sheriff's Office in all their efforts to bring the Clearwater County Jail into compliance with the IPREA standards.

The organizational chart that was provided does not show the position of the IPREA Coordinator and who he reports to even though the auditor was told he reports to Lt. Busta. Therefore, the auditor finds that the Clearwater County Jail does not meet this part of the standard.

115.11(c) The Clearwater County Sheriff's Office operates only one facility and has not assigned anyone to be an IPREA Compliance Manager.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail IPREA Policy
Interview with Sheriff Chris Goetz
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Clearwater County Sheriff's Office Organizational Chart

CORRECTIVE ACTION REQUIRED:

1. The Clearwater County Jail, in consultation with the Clearwater County Sheriff, should add the position of IPREA Coordinator to the organizational chart and who the IPREA Coordinator reports to.

This revised organizational chart should be sent to the auditor within 180 days of the date on this interim report.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

On April 14, 2020, the Clearwater County Jail sent the auditor verification and copies of documentation that the corrective action noted in the interim report has been corrected as follows:

1. The Clearwater County Jail and Clearwater County Sheriff have revised the Organizational Chart to show the position of the IPREA Coordinator in the organization. The IPREA Coordinator reports directly to the Jail Administrator who, in turn, reports to the Clearwater County Chief Deputy.

The auditor has reviewed all of the documents that were sent and the Clearwater County Jail is now fully compliant with this standard.

Standard 115.12: Contracting with other entities for the confinement of inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.12 (a)

- If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.) ☐ Yes ☐ No ☒ NA

115.12 (b)

- Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates OR the response to 115.12(a)-1 is "NO".) ☐ Yes ☐ No ☒ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.12(a-b) The Clearwater County Jail does not contract with external facilities to house or confine any of its inmates and there haven't been any contracts of this type during the twelve months prior to the IPREA audit. This part of the standard is, therefore not applicable to the Clearwater County Jail.

POLICY, MATERIALS, INTERVIEWS, AND OTHER EVIDENCE REVIEWED:

Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator

Standard 115.12: Supervision and monitoring

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.12 (c)

- Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? ☒ Yes ☐ No
- Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? ☒ Yes ☐ No

- Does the agency ensure that each facility's staffing plan takes into consideration the generally accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No
- Does the agency ensure that each facility's staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No
- Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from Federal investigative agencies in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No
- Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No
- Does the agency ensure that each facility's staffing plan takes into consideration all components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No
- Does the agency ensure that each facility's staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No
- Does the agency ensure that each facility's staffing plan takes into consideration the number and placement of supervisory staff in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No
- Does the agency ensure that each facility's staffing plan takes into consideration the institution programs occurring on a particular shift in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No ☐ NA
- Does the agency ensure that each facility's staffing plan takes into consideration any applicable State or local laws, regulations, or standards in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No
- Does the agency ensure that each facility's staffing plan takes into consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No
- Does the agency ensure that each facility's staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No

115.12 (c)

- In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)
☐ Yes ☐ No ☒ NA

115.12 (d)

- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section? ☒ Yes ☐ No
- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies? ☒ Yes ☐ No
- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan? ☒ Yes ☐ No

115.12 (e)

- Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment? ☒ Yes ☐ No
- Is this policy and practice implemented for night shifts as well as day shifts? ☒ Yes ☐ No
- Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.12(c) The Clearwater County Jail ensures that the facility develops, documents, and makes its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring to protect inmates against sexual abuse. The average number of inmates incarcerated in the Clearwater County Jail during the twelve months prior to the audit was 13 and the staffing plan was predicated on 31 inmates. The staffing plan requires a minimum of two detention staff on each shift. In calculating adequate staffing levels and determining the need for video monitoring, the facility takes into consideration the eleven mandatory elements and considerations required by this IPREA Standard:

- (1) Generally accepted detention and correctional practices;
- (2) Any judicial findings of inadequacy;
- (3) Any findings of inadequacy from Federal investigative agencies;
- (4) Any findings of inadequacy from internal or external oversight bodies;
- (5) All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated);
- (6) The composition of the inmate population;
- (7) The number and placement of supervisory staff;
- (8) Institution programs occurring on a particular shift;
- (9) Any applicable State or local laws, regulations, or standards;
- (10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and
- (11) Any other relevant factors.

The auditor and Lt. Busta identified three blind spots in the facility where one or more persons could completely avoid being seen on camera. There is a significant blind spot in the kitchen pantry where there is no camera. The room is large and could easily be used for activities that allow inmates or staff to be hidden. An inmate works in the kitchen and does all the cooking while staff do periodic checks on the inmate. At times, a deputy and the inmate worker are in the pantry at the same time. The auditor, Lt. Busta, and Sheriff Goetz agreed that the blind spot is a security risk.

The second blind spot was in the laundry room. The room is small but the interior is not viewed by camera. To correct the blind spot, it was discussed that policy could be created that prohibits more than one person to be in the room at one time and adjusting the cameras at the ends of the hallway to view who enters the laundry room.

The third blind spot is in the clothing storage room. To correct this blind spot, it was also discussed that policy could be created that prohibits more than one person to be in the room at one time and adjusting the view of the cameras at the ends of the hallway to view who enters the clothing storage room.

Because of the three blind spots, the auditor finds that the Clearwater County Jail does not meet the requirement of #5 of this IPREA standard.

Lt. Busta confirmed there were rarely any deviations of shift personnel from the staffing plan during the audit phase. The facility has in place procedures to ensure all positions are covered and there are rarely less than two deputies on shift. When necessary to guarantee two people are on each shift, the Clearwater County Jail offers comp time or rearranges staff shifts.

115.12(d) Clearwater County Jail Policy requires the staffing plan is reviewed once a year to determine if it is still adequate to meet the needs of the Clearwater County Jail and protect inmates from sexual abuse. The plan has been recently reviewed and no changes were made to the plan.

The current staffing plan of the Clearwater County Jail requires a minimum of two detention deputies on each shift. The staffing plan also allows for a supervisor on each shift or one is on call if not scheduled on shift.

115.12(e) The Clearwater County Jail has detailed in its IPREA Policy the practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment. The policy states that "Corporal or higher-level supervisors will conduct and document unannounced rounds, at a minimum, once daily on all shifts to identify and deter staff sexual abuse and sexual harassment on all shifts. The documentation of these rounds will be logged in the shift log, under Supervisory Checks, and will be made available to the IPREA Auditor as requested at the time of the audit." A review of the documentation of unannounced supervisor rounds confirmed that the rounds are done randomly and frequently on all shifts. This was also verified through formal interviews with random staff and supervisors. Interviews and policy also confirmed that the rounds are unannounced and staff are prohibited from alerting other staff that the rounds are taking place. Normally the rounds are done by a supervisor on shift who also does regular security checks. So, the other deputies on shift do not know when an unannounced IPREA round is taking place.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Idaho Jail Standards
Staffing Plan Development Documentation
Clearwater County Jail Staffing Plan
Schematic plan of where the cameras are placed
Documentation evidencing the conduct of unannounced supervisor rounds on every shift
Formal interviews with random staff and intermediate or higher-level staff
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator
Clearwater County population report for 2018 and 2019

CORRECTIVE ACTION REQUIRED:

1. The Clearwater Jail should look for solutions to fix the three blind spots such as adding cameras, mirrors, or developing policy that prohibits more than one person being in each area at one time. The Jail may also implement any other action that fixes the blind spots.
2. The Jail should also adjust the cameras at both ends of the hallway so people going into these areas can be seen on camera

These corrections should be completed within 180 days of the date on this interim report and sent to the auditor for review.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

On April 14, 2020, the Clearwater County Jail sent the auditor verification and copies of documentation that the corrective action noted in the interim report has been corrected as follows:

1. The Clearwater County Jail has revised policy to prohibit inmates from entering unmonitored areas of the jail with a deputy. The policy reads, "It is prohibited for any Sheriff's Office personnel, contractor, or volunteer to enter an unmonitored area of the jail with an offender. If such an occasion becomes necessary, a second deputy shall be present to ensure compliance with these guidelines."
2. The Clearwater County Jail has placed posters on the laundry room and clothing doors stating inmates may not accompany any Deputies into those areas.
3. The Clearwater Jail has also placed a poster in the main hall prohibiting inmates from accompanying Deputies to any of the food storage area.

The auditor has reviewed all of the documents that were sent and the Clearwater County Jail is now fully compliant with this standard.

Standard 115.14: Youthful inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.14 (a)

- Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☐ Yes ☐ No ☒ NA

115.14 (b)

- In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☐ Yes ☐ No ☒ NA
- In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☐ Yes ☐ No ☒ NA

115.14 (c)

- Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☐ Yes ☐ No ☒ NA
- Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☐ Yes ☐ No ☒ NA
- Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☐ Yes ☐ No ☒ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.14(a) The Clearwater County Jail has detailed in its IPREA Policy that a youthful inmate will not be housed in the facility. They will be housed in a Juvenile Detention or Corrections facility.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail IPREA Policy
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Clearwater County Jail Population Report for 2018 and 2019

Standard 115.15: Limits to cross-gender viewing and searches

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.15 (a)

- Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?
☒ Yes ☐ No

115.15 (b)

- Does the facility always refrain from conducting cross-gender pat-down searches of female inmates in non-exigent circumstances? (N/A here for facilities with less than 50 inmates before August 20,2017.) ☒ Yes ☐ No ☐ NA
- Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A here for facilities with less than 50 inmates before August 20, 2017.) ☒ Yes ☐ No ☐ NA

115.15 (c)

- Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches? ☒ Yes ☐ No
- Does the facility document all cross-gender pat-down searches of female inmates?
☒ Yes ☐ No

115.15 (d)

- Does the facility implement a policy and practice that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? ☒ Yes ☐ No
- Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit? ☒ Yes ☐ No

115.15 (e)

- Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status? ☒ Yes ☐ No
- If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner? ☒ Yes ☐ No

115.15 (f)

- Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? ☒ Yes ☐ No
- Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.15(a) The Clearwater County Jail's IPREA Policy details that cross gender strip searches and cross gender visual body cavity searches are prohibited except in exigent circumstances. Only medical practitioners can perform intrusive or invasive body cavity searches under all circumstances. The Clearwater County Jail reported there were not any cross-gender strip searches done in the 12 months prior to the audit for the auditor to review.

115.15(b) The Clearwater County Jail's IPREA Policy states that cross gender pat down searches of female inmates by male staff are prohibited except in exigent circumstances. In the 12 months prior to the audit, no cross-gender pat down searches of female inmates were done. The policy states "In cases of exigent circumstances where staff is required to pat search the opposite gender, the deputy shall document his or her actions in the shift log and/or inmate's activity log, along with the exigent circumstances that led to the search." The policy also lists examples of exigent circumstances. Interviews with staff and interviews with female inmates confirmed that female deputies conduct all pat down searches of female inmates and the facility does not restrict female inmate's programming or other out-of-cell activities when a female deputy is not available to conduct a pat down search.

115.15(c) The Clearwater County Jail's IPREA Policy requires that all cross-gender strip searches of male and female inmates and all cross-gender pat down searches of female inmates must be documented. There weren't any cross-gender searches done during the twelve months prior to the audit so the auditor had no documentation to review.

115.15(d) The Clearwater County Jail's IPREA Policy and practice ensures that inmates are able to shower, perform bodily functions, and change clothing with privacy. The policy details examples of the exigent circumstances that would be required for staff of the opposite gender to deviate from this policy. Policy requires announcement when staff of the opposite gender enter the housing unit. One interview with a staff member indicated that the announcement is only made by that staff member at the beginning of the shift but the rest of the interviews confirmed the other staff members are announcing each time. Interviews with inmates confirmed that the deputies were respectful of their privacy and are never inappropriate with the security checks.

115.15(e) Clearwater County Jail policy and practice prohibit searching or physically examining a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. Interviews with staff confirmed they knew the policy and no searches of this type have been done.

115.15(f) The Clearwater County Jail provides training during the FTO training upon hire. They have also recently discussed it in a staff meeting. And, Deputies receive the training during the Basic Detention Academy at P.O.S.T. of how to conduct cross gender and transgender pat down searches.

There were no transgender or intersex inmates in the facility at the time of the audit to interview.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman
Interviews with random inmates and staff
FTO training curriculum
Idaho P.O.S.T. PREA training curriculum

Standard 115.16: Inmates with disabilities and inmates who are limited English proficient

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.16 (a)

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing? ☒ Yes ☐ No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision? ☒ Yes ☐ No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities? ☒ Yes ☐ No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities? ☒ Yes ☐ No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect,

and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities? ☒ Yes ☐ No

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes)? ☒ Yes ☐ No
- Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing? ☒ Yes ☐ No
- Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? ☒ Yes ☐ No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities? ☒ Yes ☐ No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills? ☒ Yes ☐ No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Are blind or have low vision? ☒ Yes ☐ No

115.16 (b)

- Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient? ☒ Yes ☐ No
- Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? ☒ Yes ☐ No

115.16 (c)

- Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.16(a) The Clearwater County Jail IPREA Policy, does not ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Therefore, the auditor finds that the Clearwater Jail does not meet this part of the standard.

Lt. Busta and Cpl. Spiekerman reported that a staff member will read the information on reporting and responding to sexual abuse or sexual harassment to inmates who have low vision or are blind, are intellectually challenged, or who are illiterate. The facility also has the capability of printing off large print editions of the inmate handbook and PREA information to give to inmates. The Jail also keeps several pairs of reading glasses for inmates to use. However, the facility has nothing in place to communicate the information to deaf inmates. An interview with Lt. Busta indicated that they would obtain a sign language interpreter, if needed, but had no specific source as there are no contracts or agreements in place for sign language interpreters. Therefore, the auditor finds that the Clearwater County Jail does not meet this part of the standard

The Clearwater County Sheriff's Office has an agreement with a language line to provide interpretation services to people who do not speak English. The information is in Dispatch so Instructions to staff on how to use the language line will need to be posted where all detention deputies have access.

At the time of the audit, there were no inmates with disabilities or limited English proficiency in the facility for the auditor to interview.

115.16(b) Clearwater County Jail's IPREA Policy prohibits the facility from using inmate interpreters, readers, or other inmate assistants to assist other inmates in reporting a sexual abuse or sexual harassment except in limited circumstances where safety could be compromised waiting for other assistance. The Jail reports that there have been no instances in the past 12 months where inmate interpreters have been used to assist other inmates. Interviews with random staff confirmed that inmate interpreters are not used unless there are exigent circumstances and no one could remember a time that inmate interpreters have been used.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpt. Ryan Spiekerman, IPREA Coordinator
Interviews with random facility staff

CORRECTIVE ACTION REQUIRED:

1. The Clearwater County Jail should locate a sign language interpreter(s) and enter into an agreement for them to translate in the Jail when there is an inmate who is hard of hearing or deaf.
2. The Clearwater Jail should develop a policy that ensures that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.
3. The policy should also detail what the procedures are to provide those services to the disabled

All corrective action should be sent to the auditor within 180 of the date of the interim report so that a final report can be issued.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

On April 14, 2020, the Clearwater County Jail sent the auditor verification and copies of documentation that the corrective action noted in the interim report has been corrected as follows:

1. The Clearwater County Jail and Clearwater County Sheriff have entered into an agreement with a Language Line to translate for inmates who do not speak English and who are hard of hearing or deaf.
2. The Clearwater County Jail has developed policy that ensures inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

The auditor has reviewed all of the documents that were sent and the Clearwater County Jail is now fully compliant with this standard.

Standard 115.17: Hiring and promotion decisions

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.17 (a)

- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? ☒ Yes ☐ No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? ☒ Yes ☐ No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? ☒ Yes ☐ No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? ☒ Yes ☐ No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? ☒ Yes ☐ No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? ☒ Yes ☐ No

115.17 (b)

- Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates? ☒ Yes ☐ No

115.17 (c)

- Before hiring new employees, who may have contact with inmates, does the agency: perform a criminal background records check? ☒ Yes ☐ No
- Before hiring new employees, who may have contact with inmates, does the agency: consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse? ☒ Yes ☐ No

115.17 (d)

- Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates? ☒ Yes ☐ No

115.17 (e)

- Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees? ☒ Yes ☐ No

115.17 (f)

- Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions? ☒ Yes ☐ No
- Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees? ☒ Yes ☐ No
- Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? ☒ Yes ☐ No

115.17 (g)

- Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination? ☒ Yes ☐ No

115.17 (h)

- Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.17(a) Clearwater County Jail's IPREA Policy prohibits the hiring, promotion or retention of any employee who may have contact with inmates and will not enlist the services of any contractor that has the prohibited conduct specified in this standard. The background investigation also includes a criminal background check of all applicants for employment or contracting services. In addition to policy, detention deputies are required to be state certified within one year of hire and the Idaho P.O.S.T. Academy requires a thorough background check on any detention employee who will be attending the P.O.S.T Academy.

115.17(b) An interview with Lt. Busta confirmed, along with policy, that the Clearwater County Sheriff's Office considers any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates.

115.17(c) In addition to conducting criminal background checks prior to hiring an applicant, the Clearwater County Sheriff's Office contacts all prior institutional employers for information on substantiated allegations of sexual abuse or any pending investigations of allegations of sexual abuse. In the past 12 months, four people have been hired who have contact with inmates and they all have had extensive background and criminal history checks completed prior to their hiring.

115.17(d) Clearwater County Jail's IPREA Policy requires that a criminal background records check be completed before enlisting the services of any contractor who may have contact with inmates. In the past twelve months, the Clearwater County Sheriff's Office has not hired any contractors and, therefore, have not done any criminal background record checks during the last twelve months.

115.17(e) Clearwater County Jail's IPREA Policy requires a criminal background records check on all employees every four years. Lt. Busta explained that the background checks will be done every four years on everyone in the Jail regardless of their hire date. However, at the time of the audit, no background record checks after hire have been done on any staff. Therefore, the auditor finds that the Clearwater County Jail does not meet this part of the standard.

115.17(f) The Clearwater County Jail IPREA Policy, states, "The Sheriff's Office will ask all applicants and employees who may have contact with inmates directly about previous misconduct, as described above, in:

1. Written applications
2. Interviews for hiring
3. Interviews for promotions
4. Written self-evaluations
5. Yearly PREA training

Employees have a continuing affirmative duty to disclose any such misconduct.

An interview with Lt. Sheri Busta and Cpl. Spiekerman disclosed that there is nothing specific in the procedures for hiring and promotion interview boards or employee reviews. The question is also not on the written application for hire. Therefore, the auditor finds that the practice does not match the policy and the Clearwater County Jail does not meet this part of the standard.

Lt. Busta and Cpl. Spiekerman stated the staff will be asked during the yearly written self-evaluations and at the yearly PREA training.

Per policy, employees have a continuing affirmative duty to disclose any misconduct.

115.17(g) The Clearwater County Jail's IPREA Policy states that material omissions regarding such misconduct or provision of materially false information shall be grounds for termination.

115.17(h) Policy does not require the Clearwater County Sheriff's Office to provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work. Therefore, the auditor finds the Clearwater County Jail does not meet this part of the standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl Ryan Spiekerman, IPREA Coordinator
Idaho P.O.S.T. IDAPA Rules
Idaho Jail Standards

CORRECTIVE ACTION REQUIRED:

1. The Clearwater County Jail should complete a background records check on all employees who have been working for the Jail for four or more years to match policy.
2. The Clearwater County Jail should develop questions to ask applicants in hiring and promotion interview boards about any previous sexual misconduct.
3. The Clearwater Jail should either add the questions to the application for hire or remove it from the policy.
4. The Clearwater County Jail should revise policy to detail exactly what will be done on yearly requests for disclosure on incidents for the evaluations, and yearly training.
5. The Clearwater County Jail should create some forms for the yearly self-disclosure of staff and maintain the documentation.
6. The Clearwater County Jail should add to policy and procedures what actions will be taken to provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work.

Documentation confirming implemented policy and practices should be sent to the auditor within 180 days of the date of the interim report so that a final report can be issued after the 180-day corrective action period has ended.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

On April 14 and April 20, 2020, the Clearwater County Jail sent the auditor verification and copies of documentation that the corrective action noted in the interim report has been corrected as follows:

1. The Clearwater County Jail will conduct criminal background checks of all jail employees every four years on the election year. The background checks have been done this year.
2. The Clearwater County Jail has developed questions to ask applicants in hiring and promotion interview boards about any previous sexual misconduct.
3. The Clearwater County Jail has revised policy to detail exactly what will be done on yearly requests for disclosure on incidents for the evaluations, and yearly training.
4. The Clearwater County Jail has created forms for the yearly self-disclosure of staff and maintains the documentation.
5. The Clearwater County Jail has added to policy and procedures what actions will be taken to provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work.

The auditor has reviewed all of the documents that were sent and the Clearwater County Jail is now fully compliant with this standard.

Standard 115.18: Upgrades to facilities and technologies

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.18 (a)

- If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)
☐ Yes ☐ No ☒ NA

115.18 (b)

- If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the

agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)

☐ Yes ☐ No ☒ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.18(a) The Clearwater County Sheriff's Office and Clearwater County Jail hasn't had any acquisitions of new facilities or substantial expansions or modifications of the current facility over the last twelve months.

115.18(b) The Clearwater County Jail has both internal and external video camera monitoring. Cameras are positioned on all external entrances and exits from the building. Cameras internally are located in hallways, housing units, kitchen, and internal entrances into the building. There have been no additions or updates to the cameras and monitoring technology over the twelve months prior to the audit.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Description of camera placement throughout the facility
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator
Interview with Sheriff Chris Goetz

RESPONSIVE PLANNING

Standard 115.21: Evidence protocol and forensic medical examinations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.21 (a)

- If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)
☒ Yes ☐ No ☐ NA

115.21 (b)

- Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) ☒ Yes ☐ No ☐ NA
- Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) ☒ Yes ☐ No ☐ NA

115.21 (c)

- Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate? ☒ Yes ☐ No
- Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible? ☒ Yes ☐ No
- If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)? ☒ Yes ☐ No
- Has the agency documented its efforts to provide SAFEs or SANEs? ☒ Yes ☐ No

115.21 (d)

- Does the agency attempt to make available to the victim a victim advocate from a rape crisis center? ☒ Yes ☐ No

- If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? ☒ Yes ☐ No
- Has the agency documented its efforts to secure services from rape crisis centers? ☒ Yes ☐ No

115.21 (e)

- As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews? ☒ Yes ☐ No
- As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals? ☒ Yes ☐ No

115.21 (f)

- If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.) ☐ Yes ☐ No ☒ NA

115.21 (g)

- Auditor is not required to audit this provision.

115.21 (h)

- If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? [N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.21(d) above.] ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.21(a - b) The Clearwater County Sheriff's Office and Clearwater County Jail reported that they don't have a written evidence collection protocol. They said it is just the standard procedures for evidence collection but did not have a copy of those procedures. Therefore, the auditor finds that the Clearwater County Jail does not meet this part of the standard.

The Clearwater County Jail takes inmates to Clearwater Valley Hospital in Orofino, Idaho for forensic exams and the Hospital has its own uniform evidence collection protocol used for sexual assault exams. This information is based on interviews as there were no forensic medical examinations performed during the twelve months prior to the audit.

115.21(c) Clearwater County Jail requires that all victims of sexual abuse are offered access to forensic medical examinations where evidentiary or medically appropriate. Lt. Busta explained that these exams will normally be done at the Clearwater Valley Hospital in Orofino, Idaho. There is no financial cost to the victim. When possible, examinations are performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs). When SANEs or SAFEs are not available, a qualified medical practitioner performs a forensic medical examination. Attempts to get a SAFE or SANE are documented. This information is based on the policy as there were no forensic medical examinations performed during the last twelve months.

115.21(d) The Clearwater County Jail has a verbal agreement with the YWCA, located in Orofino, Idaho to provide rape crisis services to victims of sexual assault and are working on an MOU. Lt. Busta and the YWCA both confirmed the MOU is in the process of being confirmed and signed. YWCA has a 24/7 crisis hotline that inmates can call free of charge and the calls are not recorded. This information is given to inmates and interviews with the majority of inmates confirmed they know that counseling is available and is free of charge. The Jail does not make available an appropriate staff member from a community-based organization or an appropriate agency staff member to provide these services as the YWCA will respond to a sexual abuse at all times.

115.21(e) The Clearwater County Jail ensures that a victim's advocate, upon request from the inmate, accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information and referrals as warranted. This was confirmed in an interview with the YWCA. There have been no forensic medical examinations done during the last twelve months and a victim's advocate has not been requested or used by inmates.

115.21(f) The Clearwater County Jail only has an outside agency conduct the investigation if the allegation involves staff or when the Sheriff feels it is necessary to go outside the Sheriff's Office. All allegations that allegedly involve staff in a sexual abuse, or are a conflict of interest, are referred outside the agency by Sheriff Chris Goetz, to an outside law enforcement agency. The Clearwater County Jail's Policy requires the outside agency to follow the requirements in (a) through (e) of this standard and the Clearwater County Sheriff's Office will document the request to the assisting agency to follow these

requirements. All IPREA complaints are investigated for possible criminal activity and the Clearwater County Sheriff's Office maintains a close working relationship with the County Prosecutor.

The auditor relied on the policies and interviews to for this standard as there were no allegations of sexual abuse or sexual harassment of inmates during the twelve months of the audit cycle so there were no documents or investigations to review.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Interview with Sheriff Chris Goetz
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator
Interview with YWCA
Interview with a criminal investigator
Flyers that list contact information for YWCA

CORRECTIVE ACTION REQUIRED:

1. The Clearwater County Jail should locate the written evidence collection protocol that is used by the Clearwater County Sheriff's Office in sexual abuse investigations or create written protocol for what is done in evidence collection.

The written protocol should be sent to the auditor within 180 days of the date on this interim report.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

On April 14, 2020, the Clearwater County Jail sent the auditor verification and copies of documentation that the corrective action noted in the interim report has been corrected as follows:

1. The Clearwater County Jail provided an evidence collection protocol, "Recommendations for Administrators of Prisons, Jails, and Community Confinement Facilities for Adapting the U.S. Department of Justice's *A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents*." that they use for sexual assault evidence collection.

The auditor has reviewed all of the documents that were sent and the Clearwater County Jail is now fully compliant with this standard.

Standard 115.22: Policies to ensure referrals of allegations for investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.22 (a)

- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse? ☒ Yes ☐ No
- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment? ☒ Yes ☐ No

115.22 (b)

- Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior? ☒ Yes ☐ No
- Has the agency published such policy on its website or, if it does not have one, made the policy available through other means? ☒ Yes ☐ No
- Does the agency document all such referrals? ☒ Yes ☐ No

115.22 (c)

- If a separate entity is responsible for conducting criminal investigations, does such publication describe the responsibilities of both the agency and the investigating entity? [N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).] ☐ Yes ☐ No ☒ NA

115.22 (d)

- Auditor is not required to audit this provision.

115.22 (e)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.22(a - b) The Clearwater County Jail has two investigators who work in the Detective Division to conduct criminal investigations and has two staff members in the jail to conduct administrative investigations. All investigations of sexual abuse that allegedly involve staff are referred outside the agency to another law enforcement agency by the Sheriff. The investigator(s) from the outside agency will be asked to take the specialized training for investigations in a confinement setting.

All investigators from Clearwater County Sheriff's Office involved in the investigations have had the specialized training for investigators in a confinement setting and both detectives have had extensive training on sexual assault investigations. The Clearwater County Sheriff's Office has a policy that requires that allegations of sexual abuse or sexual harassment be referred for investigation to an agency with the legal authority to conduct criminal investigations, including the agency if it conducts its own investigations, unless the allegation does not involve potentially criminal behavior. This policy is posted on the Sheriff's website. All IPREA complaints are investigated for possible criminal activity and the Clearwater County Sheriff's Office maintains a close working relationship with the County Prosecutor. Once the criminal investigation is concluded by either the Detective Division or an outside agency, the case will be referred back to the Clearwater County Jail for further administrative investigation, (excluding internal investigations of staff) and disciplinary sanctions, if warranted.

The Clearwater County Jail reported that one allegation of sexual abuse of inmates was reported during the twelve months preceding the audit. The investigation determined the allegation was unfounded.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta

Clearwater County Sheriff's Office website: www.clearwatercounty.org

Interview with Sheriff Chris Goetz

Interview with Lt. Sheri Busta, Jail Administrator

Interview with Cpl. Ryan Spiekerman, IPREA Coordinator

Interviews with Clearwater County Sheriff's criminal investigator

TRAINING AND EDUCATION

Standard 115.31: Employee training

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.31 (a)

- Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment? ☒ Yes ☐ No
- Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures? ☒ Yes ☐ No
- Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment ☒ Yes ☐ No
- Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment? ☒ Yes ☐ No
- Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement? ☒ Yes ☐ No
- Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims? ☒ Yes ☐ No
- Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse? ☒ Yes ☐ No
- Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates? ☒ Yes ☐ No
- Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates? ☒ Yes ☐ No
- Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities? ☒ Yes ☐ No

115.31 (b)

- Is such training tailored to the gender of the inmates at the employee's facility? ☒ Yes ☐ No

- Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa? ☒ Yes ☐ No

115.31 (c)

- Have all current employees who may have contact with inmates received such training? ☒ Yes ☐ No
- Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures? ☒ Yes ☐ No
- In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies? ☒ Yes ☐ No

115.31 (d)

- Does the agency document, through employee signature or electronic verification, that employees understand the training they have received? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.31(a - b) The Clearwater County Jail's IPREA Policy requires that employees receive the training of the ten topics listed in the standard but does not indicate how often this training will be taken. Employees received the PREA training at the Idaho P.O.S.T. Basic Detention Academy PREA training and during the FTO phase of training. There is no further refresher training other than the subject is discussed at some staff meetings and some of the deputies receive training at the yearly Idaho Sheriffs' Association detention training. The facility didn't have any documentation to show how many have had this training or when. Therefore, the auditor finds that the Clearwater County Jail does not meet this part of the standard.

115.31(c) The training is tailored to the gender of the inmates at the Clearwater County Jail which houses both female and male inmates. There is only one facility so all employees are trained to work with both genders and there are no reassignments to care for one gender or the other.

115.31(d) Regular IPREA refresher training is not given to the employees and there is no documentation of the employees being given information on changes with the policies. Therefore, the auditor finds the Clearwater County Jail does not meet this part of the standard.

115.32(d) There is no requirement how often the refresher training will be done or that every year between refresher training employees will receive current refresher information on sexual abuse or sexual harassment policies. Therefore, the auditor finds that the Clearwater County Jail does not meet this part of the standard.

115.31(e) Documentation of the training requires that employees sign they understand the training they have received.

The auditor would like to note that many of the staff are new and had the training at POST so many were able to answer they had received training and were able to explain the training they received.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
FTO training agenda
POST PREA Lesson Plan
Staff Acknowledgement Training Form
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator
Interviews with random staff

CORRECTIVE ACTION REQUIRED:

1. The Clearwater County Jail should add to policy how often refresher training will be given to the employees and how often the staff will be informed of current sexual abuse or sexual harassment policies.
2. The Clearwater County Jail should have all employees in the jail take the NIC PREA online course, "PREA: Your Role Responding to Sexual Abuse" or other similar training every one or two years.
3. The Clearwater County Jail should maintain documentation of all training given to staff on PREA.

This corrective action should be done within 180 days of the date of this interim report and the documentation and revised policy sent to the auditor.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

On April 14, 2020, the Clearwater County Jail sent the auditor verification and copies of documentation that the corrective action noted in the interim report has been corrected as follows:

1. The Clearwater County Jail has added to its policy that staff will be trained on the ten topics required by PREA standards a minimum of every two years and will have training on PREA policies and procedures during the off years.
2. The Clearwater County Jail provided documentation that all employees have taken the NIC PREA online course, "PREA: Your Role Responding to Sexual Abuse."
3. The Clearwater County Jail maintains documentation of all training given to staff on PREA.

The auditor has reviewed all of the documents that were sent and the Clearwater County Jail is now fully compliant with this standard.

Standard 115.32: Volunteer and contractor training

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.32 (a)

- Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures? ☒ Yes ☐ No

115.32 (b)

- Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)? ☒ Yes ☐ No

115.32 (c)

- Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.32(a-b) The Clearwater County Jail does not have a policy that requires all volunteers and contractors who may have contact with inmates be trained on IPREA requirements. There were no volunteers available to interview but an interview with the contract Medical Provider confirmed that there has been no training on PREA. Therefore, the auditor finds the Clearwater County Jail does not meet this standard.

115.32(c) Volunteers and Contractors have not had the training so no documentation has been maintained.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl Ryan Spiekerman, IPREA Coordinator
Interview with contract Medical Provider

CORRECTIVE ACTION REQUIRED:

1. The Clearwater County Jail should train all contractors and volunteers in their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures.
2. The Clearwater County Jail should develop a training guideline or curriculum for what will be taught to volunteers and contract employees.
3. The Clearwater County Jail should have all volunteers and contract employees sign a training acknowledgement form, sign they understand the training they received, and maintain the documentation on file.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

On April 14, 2020, the Clearwater County Jail sent the auditor verification and copies of documentation that the corrective action noted in the interim report has been corrected as follows:

1. The Clearwater County Jail has trained all contractors and volunteers in their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures.
2. The Clearwater County Jail has developed a training guideline or curriculum for what will be taught to volunteers and contract employees.
3. The Clearwater County Jail has had all volunteers and contract employees sign a training acknowledgement form, sign they understand the training they received, and maintains the documentation on file.

The auditor has reviewed all of the documents that were sent and the Clearwater County Jail is now fully compliant with this standard.

Standard 115.33: Inmate education

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.33 (a)

- During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment? ☒ Yes ☐ No
- During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment? ☒ Yes ☐ No

115.33 (b)

- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment? ☒ Yes ☐ No
- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents? ☒ Yes ☐ No
- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents? ☒ Yes ☐ No

115.33 (c)

- Have all inmates received such education? ☒ Yes ☐ No
- Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?
☒ Yes ☐ No

115.33 (d)

- Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient? ☒ Yes ☐ No
- Does the agency provide inmate education in formats accessible to all inmates including those who are deaf? ☒ Yes ☐ No
- Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired? ☒ Yes ☐ No
- Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled? ☒ Yes ☐ No
- Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills? ☒ Yes ☐ No

115.33 (e)

- Does the agency maintain documentation of inmate participation in these education sessions?
☒ Yes ☐ No

115.33 (f)

- In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.33(a - c) The Clearwater County Jail reports that 533 inmates have been admitted in the past twelve months to the facility and all have been provided with comprehensive information during the intake, booking, and classification process. All inmates are given a pamphlet and handbook at booking that explain IPREA and the booking officer goes over the information. Before the inmates are taken to general population, they are given a PREA video to review. The viewing of this video is supposed to be documented but out of seven inmate files, the watching of the video was only documented three times. The auditor was able to view the video being offered but the viewing must be documented every time. The inmate signs that he or she has received this information. Every thirty days, a staff member meets with the inmates and explains their right to be free from sexual abuse and sexual harassment and how to report any incidences and the inmates watch the video again. Interviews with inmates confirmed that they receive the training and most of the inmates were able to tell the auditor what the policies are for zero tolerance, how to report, and who the advocates are.

115.33(d) The Clearwater County Jail ensures that key information is continuously available to inmates through posters, flyers, and inmate handbooks. IPREA posters are displayed in the dayrooms with the abuse hotline number by the phones.

There are very few materials or formats available for IPREA education to inmates with disabilities. The staff will read information to those who are illiterate or have low vision or who are blind or have developmental disabilities. The facility also keeps reading glasses available to inmates who need them to read. There is nothing in place to provide education to deaf inmates. Therefore, the auditor finds that the agency does not meet this part of the standard.

Interviews with random inmates revealed that the majority of inmates are retaining the information they are provided through the handbook, video, posters and flyers. All of the interviews with inmates confirmed that they received training and information on IPREA at booking and after booking they watched a video. All stated that information is posted in the housing unit, and is in the inmate handbook on how to report a sexual abuse or sexual harassment. All knew they could access a hotline number on the phone. All knew there was a counseling service available. Most knew there were ways to report an incident outside the facility such as their attorneys, and friends or families. The majority of the inmates said they are well taken care of in the Clearwater County Jail and the deputies respect their privacy.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

- Clearwater County Jail's IPREA Policy
- Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
- Inmate Handbook
- PREA flyers given to the inmates
- PREA Posters displayed in dayrooms
- PREA Video

Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator
Interviews with random inmates
Interviews with random staff

CORRECTIVE ACTION REQUIRED:

1. The Clearwater County Jail should locate a sign language interpreter(s) and enter into an agreement for them to translate in the Jail when there is an inmate who is hard of hearing or deaf.
2. The Clearwater County Jail should revise its policy and procedure to reflect exactly what their procedures are.

All corrective action should be sent to the auditor within 180 of the date of the interim report so that a final report can be issued.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

On April 14, 2020, the Clearwater County Jail sent the auditor verification and copies of documentation that the corrective action noted in the interim report has been corrected as follows:

1. The Clearwater County Jail and Clearwater County Sheriff have entered into an agreement with a Language Line to translate for inmates who do not speak English and who are hard of hearing or deaf.
4. The Clearwater County Jail has developed policy that ensures inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

The auditor has reviewed all of the documents that were sent and the Clearwater County Jail is now fully compliant with this standard.

Standard 115.34: Specialized training: Investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.34 (a)

- In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings?

(N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) ☒ Yes ☐ No ☐ NA

115.34 (b)

- Does this specialized training include techniques for interviewing sexual abuse victims? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] ☒ Yes ☐ No ☐ NA
- Does this specialized training include proper use of Miranda and Garrity warnings? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] ☒ Yes ☐ No ☐ NA
- Does this specialized training include sexual abuse evidence collection in confinement settings? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] ☒ Yes ☐ No ☐ NA
- Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] ☒ Yes ☐ No ☐ NA

115.34 (c)

- Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] ☒ Yes ☐ No ☐ NA

115.34 (d)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.34(a) The Clearwater County Jail's IPREA Policy requires that all of its employees who investigate sexual abuse and sexual harassment allegations in the facility receive the specialized training for conducting such investigations in confinement settings. The investigators are required to take the class or online PREA Investigators course, "Investigating Sexual Abuse in a Confinement Setting" available through the PREA Resource Center and the National Institute of Corrections.

Two investigators from the detective division do the criminal investigations in the Jail. One investigator has taken the online course and conducts all criminal investigations into allegations of sexual misconduct and sexual harassment in the Jail. The second investigator was on leave at the time of the audit and will take the class upon return to the Sheriff's Office. Allegations involving staff in sexual abuse are investigated by an outside agency selected by the Sheriff. There are two administrative investigators in the jail and both have attended the classroom session of "Investigating Sexual Abuse in a Confinement Setting."

115.34(b) Specialized training includes techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. Detectives from the Clearwater County Sheriff's Detective Division have also had additional training in sexual abuse investigations for their job requirements and are very familiar with the proper use of Miranda and Garrity warning as they use them frequently in their job duties.

115.34(c) The auditor reviewed the Certificates of Completion for the investigators who took the specialized training.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Interviews with agency criminal investigator
Interview with Sheriff Chris Goetz
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator
Certificates of Completion of the online NIC course, "Investigating Sexual Abuse in a Confinement Setting" and the classroom course.

Standard 115.35: Specialized training: Medical and mental health care

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.35 (a)

- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? ☒ Yes ☐ No
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? ☒ Yes ☐ No
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? ☒ Yes ☐ No
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? ☒ Yes ☐ No

115.35 (b)

- If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams.) ☐ Yes ☐ No ☒ NA

115.35 (c)

- Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? ☒ Yes ☐ No

115.35 (d)

- Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? ☒ Yes ☐ No
- Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.35(a) The Clearwater County Sheriff's Office contracts with Jami Tyler, NP to provide on-site medical care at the facility. The Medical Provider comes to the facility twice a week and is never left alone with an inmate. A deputy stands just outside the door but can hear anything unusual from the room and no private physical exams are done at the facility. The entrance to the medical room is just inside the gate from the office area and the entrance is on camera. An interview with the NP confirmed that she has been trained on the four elements of this part of the standard. The NP also works at the State Hospital with patients who are mentally ill or have been sexually abused.

115.35(b) The Medical Contractor does not conduct forensic exams at the Clearwater County Jail. Victims of sexual abuse are transported to the Clearwater Valley Hospital in Orofino, Idaho for the exam, when medically appropriate. There have been no incidents of sexual abuse so no forensic exams had been done at the time of the audit.

115.35(c - d) The Clearwater County Jail does not have a training curriculum or training guideline to show what is trained to contract staff and do not have documentation that all medical practitioners who work at the facility have received the contractor training provided by the facility and listed in (a) of this standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Interview with the contract Medical Provider
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator

CORRECTIVE ACTION REQUIRED:

1. The Clearwater County Jail should create a training guideline or curriculum to show what is trained to contract staff.
2. The Clearwater County Jail should have medical contract staff sign a training acknowledgement form, sign they understand the training they received, and maintain the documentation on file.

The training guide and documentation will be sent to the auditor within 180 of the date on this interim report.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

On April 14, 2020, the Clearwater County Jail sent the auditor verification and copies of documentation that the corrective action noted in the interim report has been corrected as follows:

1. The Clearwater County Jail ensured their medical provider took the online NIC course, "PREA: Medical Health Care for Sexual Assault Victims in a Confinement Setting."
2. The Clearwater County Jail has maintained the training completion certificate on file.

The auditor has reviewed all of the documents that were sent and the Clearwater County Jail is now fully compliant with this standard.

SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

Standard 115.41: Screening for risk of victimization and abusiveness

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.41 (a)

- Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? ☒ Yes ☐ No
- Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? ☒ Yes ☐ No

115.41 (b)

- Do intake screenings ordinarily take place within 72 hours of arrival at the facility?
☒ Yes ☐ No

115.41 (c)

- Are all PREA screening assessments conducted using an objective screening instrument?
☒ Yes ☐ No

115.41 (d)

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability? ☒ Yes ☐ No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate? ☒ Yes ☐ No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate? ☒ Yes ☐ No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?
☒ Yes ☐ No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?
☒ Yes ☐ No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child? ☒ Yes ☐ No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)? ☒ Yes ☐ No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization? ☒ Yes ☐ No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability? ☒ Yes ☐ No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes? ☒ Yes ☐ No

115.41 (e)

- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse? ☒ Yes ☐ No
- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses? ☒ Yes ☐ No
- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse? ☒ Yes ☐ No

115.41 (f)

- Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening? ☒ Yes ☐ No

115.41 (g)

- Does the facility reassess an inmate's risk level when warranted due to a: Referral? ☒ Yes ☐ No

- Does the facility reassess an inmate's risk level when warranted due to a: Request?
☒ Yes ☐ No
- Does the facility reassess an inmate's risk level when warranted due to a: Incident of sexual abuse? ☒ Yes ☐ No
- Does the facility reassess an inmate's risk level when warranted due to a: Receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?
☒ Yes ☐ No

115.41 (h)

- Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section? ☒ Yes ☐ No

115.41 (i)

- Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☒ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☐ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.41(a - b) Clearwater County Jail IPREA Policy requires the Booking Deputy to complete an initial IPREA risk assessment on inmates when they booked into the facility. Within 72 hours of booking, a detention deputy conducts a full risk screening on each inmate. The Clearwater County Jail reported there were 225 inmates entering the facility whose length of stay was for 72 hours or more who were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of entering the facility. Interviews with inmates confirmed that all of them had a risk screening at the time of, or shortly after, booking.

115.41(c) The risk assessments are completed on an objective screening instrument. The auditor reviewed seven files of inmates and verified that the screening instrument is being used.

11.5.41(d) The screening form does not have the following items required by the standard. Therefore, the auditor finds the Clearwater County Jail does not meet this part of the standard.

- (1) The instrument only screens for mental or physical disability and not developmental disability.
- (2) The instrument does not ask whether the inmate has previously been incarcerated.
- (3) The instrument does not ask whether the inmate's criminal history is exclusively non-violent.
- (4) The instrument asks if the inmate has ever been sexually abused in an institution but doesn't ask if the inmate has ever been sexually abused in the community.

The policy states that the Jail will consider all of the above but does not have these items on the screening form.

115.41(e) The screening instrument considers prior acts of sexual abuse, but does not consider prior convictions for violent offenses or the history of prior institutional violence or sexual abuse as known to the agency. Therefore, the auditor finds the Clearwater County Jail does not meet this part of the standard.

115.41(g) Clearwater County Jail's IPREA Policy also requires that an inmate's risk level be reassessed within 30 days of the inmate's arrival at the Clearwater County Jail when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that directly affects the inmate's risk of victimization or abusiveness. None of the listed incidents have happened so there were no reassessments for the auditor to review

115.41(h) The policy prohibits the Clearwater County Jail from disciplining inmates for refusing to answer any questions referring to sexual abuse or for not disclosing complete information on the screening questions listed in this standard. The standard only requires that inmates are never disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section. Because of this policy and practice of not disciplining inmates for refusing to answer any questions referring to sexual abuse or not disclosing complete information on any questions during the screening process, the auditor finds that the Clearwater County Jail exceeds this part of the standard.

115.41(i) Policy states that "The Clearwater County Jail shall ensure the sensitive assessment information is not exploited to the inmate's detriment by staff or other inmates and that any documents obtained from the assessment are secured in a manner recommended by the IPREA Coordinator." Lt. Busta stated that all detention deputies classify inmates so they all have access to the information. The screening information is in the Jail Management program so only the jail can access the information. Policy states the Sheriff, Jail Deputies, and the IPREA Coordinator are the only persons who can authorize access to the information to anyone outside the Jail. Policy states that any staff or inmate who uses the information to the inmate's detriment will face disciplinary action.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Objective Risk Screening Instrument.
Interviews with random staff
Interviews with random inmates
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator
Random Inmate Files

CORRECTIVE ACTION REQUIRED:

1. The Clearwater County Jail should add to its screening form in developmental disability.
2. The Clearwater County Jail should add to its screening form whether the inmate has been previously incarcerated.
3. The Clearwater County Jail should add to its screening form whether the inmate's criminal history is exclusively non-violent.
4. The Clearwater County Jail should add to its screening form whether the inmate has been sexually abused in the community along with the question for an institution.
5. The Clearwater County Jail should add to its screening form the consideration of prior convictions for violent offenses.
6. The Clearwater County Jail should add to its screening form the consideration of prior violence or sexual abuse as known to the agency.

All corrective action should be sent to the auditor within 180 days of the date of the interim report so that a final report can be issued.

Once the corrective action has been successfully completed, the Clearwater County Jail will exceed this standard.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

On April 14, 2020, the Clearwater County Jail sent the auditor verification and copies of documentation that the corrective action noted in the interim report has been corrected as follows:

1. The Clearwater County Jail has added to its screening form in developmental disability.
2. The Clearwater County Jail has added to its screening form whether the inmate has been previously incarcerated.
3. The Clearwater County Jail has added to its screening form whether the inmate's criminal history is exclusively non-violent.
4. The Clearwater County Jail has added to its screening form whether the inmate has been sexually abused in the community along with the question for an institution.
5. The Clearwater County Jail has added to its screening form the consideration of prior convictions for violent offenses.
6. The Clearwater County Jail has added to its screening form the consideration of prior violence or sexual abuse as known to the agency.

The auditor has reviewed all of the documents that were sent and the Clearwater County Jail is now fully compliant and exceeds this standard.

Standard 115.42: Use of screening information

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.42 (a)

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments? ☒ Yes ☐ No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments? ☒ Yes ☐ No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments? ☒ Yes ☐ No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments? ☒ Yes ☐ No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments? ☒ Yes ☐ No

115.42 (b)

- Does the agency make individualized determinations about how to ensure the safety of each inmate? ☒ Yes ☐ No

115.42 (c)

- When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)? ☒ Yes ☐ No

- When making housing or other program assignments for transgender or intersex inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?
☒ Yes ☐ No

115.42 (d)

- Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?
☒ Yes ☐ No

115.42 (e)

- Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments? ☒ Yes ☐ No

115.42 (f)

- Are transgender and intersex inmates given the opportunity to shower separately from other inmates? ☒ Yes ☐ No

115.42 (g)

- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? ☒ Yes ☐ No
- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? ☒ Yes ☐ No
- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☒ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☐ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.42(a) The Clearwater County Jail's IPREA Policy requires that all information gathered during the intake and assessment process be used to ensure appropriate classification and placement of inmates into housing, work programs, and regular programs as well as any necessary security or protective precautions required to ensure the inmate's safety.

115.42(b) All detention deputies are Classification Deputies and conduct all of the assessments and reassessments of inmates in the facility to make individualized determinations of how to ensure the safety of each inmate.

115.42(c) The Clearwater County Jail 's IPREA Policy requires that the deputy doing the classification carefully consider, on a case-by-case basis, whether placement of a transgender or intersex inmate in a particular housing and bed assignment will ensure the inmate's health and safety and whether or not that placement would present management or security issues.

115.42(d) Policy requires that at least monthly beginning with the intake date, a reassessment will be completed on all transgender and intersex inmates to review any threats of safety experienced by the inmate. Because of the reassessment being done at least monthly rather than at least twice a year, the auditor finds the Clearwater County Jail exceeds this standard.

115.42(e) Transgender and intersex inmates are asked about their own views in respect to their safety while incarcerated in the facility and those considerations are given serious consideration when making housing, bed, and programming assignments.

The Clearwater County Jail reports one transgender female was held overnight in the twelve months prior to the audit. The female preferred being held with the female inmates and the other female inmates were fine with her being housed with them so that is where she was housed overnight. No other transgender persons were held during the twelve months prior to the audit.

115.42(f) Policy states that transgender and intersex inmates will be allowed to shower separately from other inmates. Lt. Sheri Busta explained that they will be offered a shower in the shower room or in an empty cell.

115.42(g) The Clearwater County Jail's IPREA Policy prohibits placing lesbian, gay, bisexual, transgender or intersex inmates in a particular housing or bed assignment or other assignment based solely on such identifier or status unless the placement is ordered by a consent decree, legal settlement, or legal judgment of which the intent is the protection of inmates. The Clearwater County Jail is under no such legal restriction.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets and exceeds the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Objective Screening Instrument
Interviews with random staff
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator

Standard 115.43: Protective Custody

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.43 (a)

- Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers? ☒ Yes ☐ No
- If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment? ☒ Yes ☐ No

115.43 (b)

- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible? ☒ Yes ☐ No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible? ☒ Yes ☐ No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible? ☒ Yes ☐ No

- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible? ☒ Yes ☐ No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The opportunities that have been limited? ☒ Yes ☐ No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The duration of the limitation? ☒ Yes ☐ No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The reasons for such limitations? ☒ Yes ☐ No

115.43 (c)

- Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged? ☒ Yes ☐ No
- Does such an assignment not ordinarily exceed a period of 30 days? ☒ Yes ☐ No

115.43 (d)

- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety? ☒ Yes ☐ No
- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged? ☒ Yes ☐ No

115.43 (e)

- In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.43(a and d) The Clearwater County Jail IPREA Policy prohibits staff from placing inmates at high risk for sexual victimization in involuntary segregated housing unless the determination has been made that this housing assignment best protects the safety of the inmate and a review of other alternatives failed to provide adequate safety from likely abusers. The inmate may be placed in involuntary segregation for a time period, not to exceed 24 hours, in order to complete the assessment and find appropriate housing. Interviews with random staff and inmates revealed no incidents of involuntary housing being used for this purpose.

115.43(b) The policy requires any inmates placed in involuntary segregated housing have access to programs, privileges, education and work opportunities to the extent possible. If opportunities are restricted, staff will document which opportunities have been limited, the duration of the limitation, and the reasons for the limitations.

115.43(c) If no alternative housing can be found immediately, the inmate may normally be held in involuntary segregated housing for no more than 30 days.

115.43(d) The involuntary restricted housing of an inmate will be documented and will detail staff's basic concern for the inmate's safety, the reason why no alternative means of separation can be achieved, and the reason why the 30 days may need to be extended, if it does.

115.43(e) If an involuntary segregated housing assignment is made, a status review of the inmate by the Jail Administrator will be completed every 30 days to determine if there is a continuing need to separate the inmate from the general population. All 30-day status reviews are documented.

At the time of the audit, there were no inmates assigned to involuntary segregated housing to separate them from likely abusers over the twelve-month period prior to the audit.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff and inmate interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Objective Risk Assessment Instruments
Idaho Jail Standards
Interviews with random staff
Interviews with random inmates

Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator

REPORTING

Standard 115.51: Inmate reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.51 (a)

- Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment? ☒ Yes ☐ No
- Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment? ☒ Yes ☐ No
- Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents? ☒ Yes ☐ No

115.51 (b)

- Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency? ☒ Yes ☒ No
- Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials? ☒ Yes ☐ No
- Does that private entity or office allow the inmate to remain anonymous upon request? ☒ Yes ☐ No
- Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? ☒ Yes ☐ No

115.51 (c)

- Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties? ☒ Yes ☐ No
- Does staff promptly document any verbal reports of sexual abuse and sexual harassment? ☒ Yes ☐ No

115.51 (d)

- Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.51(a) The Clearwater County Jail's IPREA Policy clearly outlines multiple ways for inmates to privately report a sexual assault, sexual harassment, or retaliation from other inmates or staff for reporting sexual abuse or sexual harassment, and any staff neglect that may have contributed to sexual abuse or sexual harassment. Nine ways to report within the facility are listed in policy and there are six ways to report a sexual abuse or sexual harassment outside the agency listed in the policy. The reporting methods within the facility include Detention Deputy, Medical or Mental Health Staff, other staff members, detention or agency administration, volunteers, kites, personal letter to staff, personal letter to administration, and PREA reporting hotline. The inmate handbook lists several ways to report but the handbook is different from the policy. Therefore, the auditor finds the Clearwater County Jail does not meet this part of the standard.

115.51(b) The Clearwater County Jail's IPREA Policy has provided three methods for inmates to report outside the facility: third party, Orofino PD, and the YMCA. However, policy does not match practice as there is only third party, and YWCA. An interview with the YWCA confirmed they will take inmate reports of sexual abuse but, if the inmate does not give them permission to pass the information on to the Jail, confidentiality is given to the inmate and the allegation may not be reported to the Jail. There is no verbal or written agreement with Orofino PD. The inmate handbook does not have the YWCA listed or numbers for them. Therefore, the auditor finds that the Clearwater County Jail does not meet this part of the standard.

Inmates are rarely detained solely on civil immigration holds, but the agency has in policy that these inmates are provided information on how to contact relevant consular officials and relevant officials of the Department of Homeland Security.

115.51(c) The Clearwater County Jail's IPREA Policy requires all staff to accept reports made verbally, in writing, anonymously, and from third parties. All allegations are documented promptly upon receipt and reported to a supervisor.

115.51(d) The Clearwater County Jail has in policy that staff can privately report to anyone they feel comfortable reporting to in the chain of command including the Jail Administrator, the Chief Deputy, the

Sheriff, and the IPREA Coordinator. Interviews with staff revealed that they all feel comfortable reporting privately to anyone in the Chain of Command, up to and including, the Sheriff.

Interviews with staff and inmates clearly demonstrate they are very knowledgeable about IPREA and the variety of methods to report sexual abuse and sexual harassment of inmates.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
IPREA Inmate Acknowledgement Form and random signatures
IPREA flyers and posters
Inmate Handbook
Interviews with random inmates
Interviews with random staff
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator

CORRECTIVE ACTION REQUIRED:

1. The Clearwater County Jail should enter into an agreement with the Orofino Police Department or other outside agency to accept sexual abuse reports from their inmates and immediately forward them to the Clearwater County Jail.
2. When an agreement is reached, the Clearwater County Jail should provide the contact information to the inmates, make the calls free calls, and alert the inmates that the calls are free.
3. The Clearwater County Jail should revise the policy to list the outside agencies that have agreed to accept sexual abuse reports and delete those who haven't.
4. The Clearwater County should revise the handbook to match the policy ways to report a sexual abuse or sexual harassment.

Documentation that the corrective action has been completed should be sent to the auditor within 180 days of the date of this interim report.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

On April 14, 2020, the Clearwater County Jail sent the auditor verification and copies of documentation that the corrective action noted in the interim report has been corrected as follows:

1. The Clearwater County Jail has entered into an agreement with the Orofino Police Department to accept sexual abuse reports from their inmates and immediately forward them to the Clearwater County Jail.
2. The Clearwater County Jail has provided the contact information to the inmates, made the calls free calls, and alerted the inmates that the calls are free.

3. The Clearwater County Jail has revised the policy to list the outside agencies that have agreed to accept sexual abuse reports.
4. The Clearwater County has revised the handbook to match the policy ways to report a sexual abuse or sexual harassment.

The auditor has reviewed all of the documents that were sent and the Clearwater County Jail is now fully compliant with this standard.

Standard 115.52: Exhaustion of administrative remedies

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.52 (a)

- Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse. ☒ Yes ☐ No ☐ NA

115.52 (b)

- Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.) ☐ Yes ☐ No ☒ NA
- Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.) ☐ Yes ☐ No ☒ NA

115.52 (c)

- Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) ☐ Yes ☐ No ☒ NA
- Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) ☐ Yes ☐ No ☒ NA

115.52 (d)

- Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.) ☐ Yes ☐ No ☒ NA
- If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)
☐ Yes ☐ No ☒ NA
- At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.) ☐ Yes ☐ No ☒ NA

115.52 (e)

- Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)
☐ Yes ☐ No ☒ NA
- Are those third parties also permitted to file such requests on behalf of inmates? (If a third-party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.) ☐ Yes ☐ No ☒ NA
- If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)
☐ Yes ☐ No ☒ NA

115.52 (f)

- Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) ☐ Yes ☐ No ☒ NA
- After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)
☐ Yes ☐ No ☒ NA
- After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.) ☐ Yes ☐ No ☒ NA

- After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)
☐ Yes ☐ No ☒ NA
- Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) ☐ Yes ☐ No ☒ NA
- Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) ☐ Yes ☐ No ☒ NA
- Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) ☐ Yes ☐ No ☒ NA

115.52 (g)

- If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.) ☐ Yes ☐ No ☒ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The Clearwater County Jail is exempt from this standard as it does not require an inmate to submit a grievance to report a sexual abuse or sexual harassment incident. If an inmate does submit a grievance, it is withdrawn from the grievance system and treated as a complaint rather than a grievance.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Busta, IPREA Coordinator

Standard 115.53: Inmate access to outside confidential support services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.53 (a)

- Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations? ☒ Yes ☐ No
- Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? ☒ Yes ☐ No
- Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible? ☒ Yes ☐ No

115.53 (b)

- Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws? ☒ Yes ☐ No

115.53 (c)

- Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse? ☒ Yes ☐ No
- Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? ☒ Yes ☒ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.53(a and c) The Clearwater County Jail has a verbal agreement with the YWCA in Orofino, Idaho to provide advocacy and in-person support services to a victim of sexual abuse through the forensic medical examination process as well as the investigatory interview process. The information for the YWCA is posted in the housing units and interviews with random inmates revealed that the majority of inmates were aware there were advocacy services available, the calls were free or unmonitored, what services the group provides, and the extent of confidentiality they would have talking to the group.

The Clearwater County Jail's IPREA Policy enables communication between the advocate and the victim in as confidential manner as is possible.

115.53(b) Prior to giving the inmate access to the advocate, the Clearwater County Jail's IPREA Policy states that the agency explains to the inmate the extent that the communication will be monitored. This information is on a flyer that is given to the inmates. The advocate is offered free of charge to the inmate. The facility will also explain to the inmate that information may be relayed from the victim advocate to the facility in order to initiate an investigation into the sexual abuse allegation in accordance with mandatory reporting laws.

There have been no forensic medical examinations done during the past twelve months and a victim's advocate has not been requested or used by inmates so there was no documentation for the auditor to review.

115.53(c) An MOU between the YWCA and the Clearwater County Sheriff's Office and Jail has been developed to outline the services that the YWCA will provide and the responsibilities of the Jail. The MOU is in the process of gaining the signatures of both agencies. An interview with Lt. Busta and interview with the YWCA confirmed that they are just waiting for the MOU to be signed.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
IPREA informational brochure
Reporting posters displayed in housing units
Interviews with random inmates
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator
Interview with the YWCA

Standard 115.54: Third-party reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.54 (a)

- Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment? ☒ Yes ☐ No
- Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.54(a) The Clearwater County Jail allows third parties to report a sexual abuse or sexual harassment incident on behalf of an inmate. The information of how to report the sexual abuse or sexual

harassment of an inmate is posted on the Sheriff's Office website. The auditor verified the information on the website.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator
Clearwater Sheriff's Office website: www.clearwatercounty.org

OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

Standard 115.61: Staff and agency reporting duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.61 (a)

- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency? ☒ Yes ☐ No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment? ☒ Yes ☐ No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation? ☒ Yes ☐ No

115.61 (b)

- Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions? ☒ Yes ☐ No

115.61 (c)

- Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section? ☒ Yes ☐ No
- Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services? ☒ Yes ☐ No

115.61 (d)

- If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws? ☒ Yes ☐ No

115.61 (e)

- Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.61(a) The Clearwater County Jail's IPREA Policy requires staff to immediately report to the IPREA Coordinator any suspected or alleged sexual abuse or sexual harassment that occurred in a facility whether or not it is part of the agency. The policy also states that staff are required to report to the IPREA Coordinator any retaliation against inmates or staff who report an incident and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Staff are required to write a report of the incident and forward it to the IPREA Coordinator before the employee goes off shift. Interviews with random staff confirmed that they are aware of this policy.

115.61(b) The IPREA Policy prohibits staff from revealing any information related to a sexual abuse or sexual harassment report to anyone other than designated supervisors or officials and, to the extent necessary, to make treatment, investigation, and other security and management decisions. Interviews with random staff confirmed they are aware of the policy.

115.61(c) Interviews with the Medical Provider within the facility confirmed the policy and practice that the medical staff are required to report sexual abuse that is disclosed to them by inmates and, at the initiation of services, must inform the inmate of their duty to report the incident and the limitations of confidentiality. An interview with the Medical Provider confirmed knowledge of the practice.

115.61(d) If the alleged victim is under the age of 18, the Clearwater County Sheriff's Office reports the allegation of sexual abuse to the Idaho Department of Health and Social Services. If the alleged victim is a "vulnerable adult", the report will be made to Idaho's Adult Protection Services and if the alleged victim is a child under the age of 18, the report will be made to Idaho's Child Protective Services. Interviews with random staff confirmed they were aware of this reporting requirement.

115.61(e) The Clearwater County Jail's IPREA Policy states that all reports of allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, are referred to the facility's designated investigators.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Interviews with random staff
Interview with the Medical Provider
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator

Standard 115.62: Agency protection duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.62 (a)

- When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.62(a) The Clearwater County Jail reports that there have been no situations in the past twelve months where the facility determined an inmate was subject to a substantial risk of imminent sexual abuse. Inmates at substantial risk of imminent sexual abuse are either immediately removed from the

housing unit and reassigned to other appropriate housing that ensures the inmate's safety or the perpetrator immediately reassigned to another housing unit, depending on the circumstances of the situation. The Clearwater County Jail's IPREA Policy lists several examples of options that may be used to protect the inmate for the rest of the incarceration.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Interviews with random staff
Interview with Sheriff Chris Goetz
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator

Standard 115.63: Reporting to other confinement facilities

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.63 (a)

- Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred? ☒ Yes ☐ No

115.63 (b)

- Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation? ☒ Yes ☐ No

115.63 (c)

- Does the agency document that it has provided such notification? ☒ Yes ☐ No

115.63 (d)

- Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.63(a) The Clearwater County Jail's IPREA Policy requires the Jail Administrator, Undersheriff, or Sheriff to report any sexual abuse allegation received regarding an inmate abused at another facility to the agency head where the sexual abuse is alleged to have occurred. The Clearwater County Jail reports that no reports of this type were received during the audit cycle.

115.63(b) Policy requires this notice to occur as soon as possible but, in no case, will the report be made later than 72 hours after the allegation has been received.

115.63(c) The notification from the Clearwater County Jail Administrator, Undersheriff, or Sheriff to the other agency is documented.

115.63(d) Clearwater County Jail policy and practice require that allegations received from another facility of an inmate being sexually abused or sexually harassed in the Clearwater County Jail are investigated in accordance with the IPREA standards. Interviews with Sheriff Goetz and Lt. Busta confirmed this is the practice. The Clearwater County Jail reports there have been no incidences of this in the twelve months prior to the audit

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Interview with Sheriff Chris Goetz
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator

Standard 115.64: Staff first responder duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.64 (a)

- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?
☒ Yes ☐ No
- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence? ☒ Yes ☐ No
- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? ☒ Yes ☐ No
- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? ☒ Yes ☐ No

115.64 (b)

- If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.64(a) The Clearwater County Jail's IPREA Policy outlines in policy the responsibilities of all staff members receiving an allegation of sexual abuse. The policy details in depth the following guidelines for the first responder:

- (1) Separate the alleged victim and abuser;
- (2) Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence;
- (3) If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and
- (4) If the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

The Clearwater County Jail reported that, in the past twelve months, there were no allegations that an inmate was sexually abused or sexually harassed while in the facility.

115.64(b) The Clearwater County Jail's IPREA Policy states that when the first staff responder is not a security staff member, he or she shall request that the alleged victim not take any actions that could destroy physical evidence and then notify security staff immediately. There were no incidents in which a non-security staff member was a first responder to a sexual abuse during the audit cycle.

Interviews with random staff and supervisors confirmed that staff are very knowledgeable in their duties as a first responder to a sexual abuse or sexual harassment incident and have received the training in their yearly IPREA training.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Interviews with random staff
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator

Standard 115.65: Coordinated response

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.65 (a)

- Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.65(a) The Clearwater County Jail has detailed in its IPREA Policy the actions that need to be taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Interview with investigator
Interviews with random staff
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator

Standard 115.66: Preservation of ability to protect inmates from contact with abusers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.66 (a)

- Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? ☒ Yes ☐ No

115.66 (b)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The Clearwater County Sheriff's Office and Clearwater County Jail do not have any collective bargaining agreements in place and have not had any at any time. Clearwater County Sheriff's Office is non-union and, therefore, has no union collective bargaining agreements. Therefore, the auditor determined that this standard is not applicable to the Clearwater County Sheriff's Office and Clearwater County Jail.

Standard 115.67: Agency protection against retaliation

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.67 (a)

- Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff? ☒ Yes ☐ No
- Has the agency designated which staff members or departments are charged with monitoring retaliation? ☒ Yes ☐ No

115.67 (b)

- Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations? ☒ Yes ☐ No

115.67 (c)

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? ☒ Yes ☐ No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? ☒ Yes ☐ No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation? ☒ Yes ☐ No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports? ☒ Yes ☐ No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes? ☒ Yes ☐ No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes? ☒ Yes ☐ No

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff? ☒ Yes ☐ No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff? ☒ Yes ☐ No
- Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? ☒ Yes ☐ No

115.67 (d)

- In the case of inmates, does such monitoring also include periodic status checks? ☒ Yes ☐ No

115.67 (e)

- If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation? ☒ Yes ☐ No

115.67 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- ☒ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☐ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.67(a and d) Clearwater County Jail's IPREA Policy prohibits retaliation against inmates or staff members who report sexual abuse or sexual harassment and require monitoring of the inmate or staff member for retaliation. The agency reported that the IPREA Coordinator or Jail Administer is charged

with monitoring retaliation. The Clearwater County Jail reported that there have been no incidents of retaliation against an inmate or a staff member for reporting a sexual abuse or sexual harassment. An interview with the Jail Administrator assigned to conduct the monitoring reflected that the monitoring occurs whenever a report of sexual abuse or sexual harassment is made. The IPREA Coordinator or Jail Administrator will monitor the person and both policy and the Jail Administrator state that the monitoring will continue for a minimum of 90 days. Therefore, the auditor finds that the Clearwater County Jail exceeds the standard as the policy is written to the higher PREA standard.

115.67(b) Clearwater County Jail policy requires the facility to protect inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff. Such protections shall be afforded via direct monitoring by staff, housing changes to separate victims from abusers, removal of alleged staff members from contact with victims, emotional support services for inmates or staff members who fear retaliation, and investigation.

115.67(c) Clearwater County Jail's IPREA Policy requires that, following a report of sexual abuse, the agency shall act promptly to remedy any allegation of retaliation against any inmate or staff member who reports sexual abuse or sexual harassment.

115.67(d) Policy also requires the facility to take proper measures to protect any other individual who has cooperated with an investigation and expresses a fear of retaliation. During the past twelve months, there have been no incidents where a person has expressed fear of retaliation and needed monitoring.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets and exceeds the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Interview with Sheriff Chris Goetz
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator

Standard 115.68: Post-allegation protective custody

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.68 (a)

- Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.68(a) The Clearwater County Jail's IPREA Policy prohibits staff from placing inmates who allege to have suffered sexual abuse in involuntary segregated housing unless the determination has been made that this housing assignment best protects the safety of the inmate and a review of other alternatives failed to provide adequate safety from likely abusers. When inmates are placed in involuntary segregation in order to separate the victim from the abuser, the placement is only for the time needed to finish the investigation and find alternative housing. Interviews with random staff and inmates revealed no incidents of involuntary segregated housing being used for this purpose during the twelve months prior to the audit.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Interviews with random staff
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator

INVESTIGATIONS

Standard 115.71: Criminal and administrative agency investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.71 (a)

- When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).] ☒ Yes ☐ No ☐ NA
- Does the agency conduct such investigations for all allegations, including third party and anonymous reports? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).] ☒ Yes ☐ No ☐ NA

115.71 (b)

- Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34? ☒ Yes ☐ No

115.71 (c)

- Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? ☒ Yes ☐ No
- Do investigators interview alleged victims, suspected perpetrators, and witnesses?
☒ Yes ☐ No
- Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? ☒ Yes ☐ No

115.71 (d)

- When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution? ☒ Yes ☐ No

115.71 (e)

- Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff? ☒ Yes ☐ No
- Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding? ☒ Yes ☐ No

115.71 (f)

- Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? ☒ Yes ☐ No
- Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings? ☒ Yes ☐ No

115.71 (g)

- Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible? ☒ Yes ☐ No

115.71 (h)

- Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? ☒ Yes ☐ No

115.71 (i)

- Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years? ☒ Yes ☐ No

115.71 (j)

- Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation? ☒ Yes ☐ No

115.71 (k)

- Auditor is not required to audit this provision.

115.71 (l)

- When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

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115.71(a) Clearwater County Jail's IPREA Policy requires that investigators initiate an investigation immediately upon receiving an allegation of sexual abuse or sexual harassment. Administrative investigations are done by the Jail Administrator or the IPREA Coordinator and criminal investigations are done by the Clearwater County Detective Division. When staff are allegedly involved, the case is turned over to an outside law enforcement agency to conduct the investigation. This is done promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.

115.71(b) There are two investigators assigned to investigate sexual abuse and sexual harassment in the Clearwater County Jail and there are two detectives that will investigate anything with criminal elements. Both investigators in the jail have taken the classroom course, "Investigating Sexual Abuse in a Confinement Setting" and the one detective has taken the online course.

All criminal allegations are investigated by Detectives who have had extensive training on community sexual abuse investigations and use Miranda and Garrity warnings frequently in day to day investigations.

115.71(c) An interview with one of the criminal investigators confirmed that upon initiation of an investigation into a sexual abuse allegation, the investigator gathers and preserves direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data, interviews alleged victims, suspected perpetrators, and witnesses, and reviews prior complaints and reports of sexual abuse involving the suspected perpetrator. There were no criminal investigations into sexual abuse or sexual harassment for the auditor to review.

115.71(d) Unless the allegation is an immediately recognizable criminal investigation, investigations will be initiated as an administrative investigation. If there is any indication that the investigation appears to involve staff, Sheriff Chris Goetz will request the investigation be done by an outside law enforcement agency. The Clearwater County Detectives are aware of when compelled interviews are an obstacle to prosecution as they use them frequently in their regular job duties.

One inmate alleged that during a transport, the transporting deputy rubbed her arm when he was placing her in the vehicle and she felt it was inappropriate. Upon investigation, the determination was that the allegation was unfounded.

115.71(e) Clearwater County Jail's IPREA Policy requires that the credibility of the alleged victim will be assessed on a case-by-case basis and shall not be determined by the person's status as an inmate. An interview with an investigator stated that credibility is based on evidence, interviews, and the crime scene. Inmates who allege sexual abuse are not required to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation.

115.71(f) Policy requires that a thorough report be written at the conclusion of an administrative investigation that includes a description of what evidence was collected or reviewed, the reasons behind any credibility assessments, and any facts and findings the investigator discovered in the investigation. Investigators will also consider whether staff actions or failures to act contributed to the incident of abuse.

115.71(g and h) Clearwater County Jail's IPREA Policy and an interview with a criminal investigator confirmed that comprehensive reports are written at the conclusion of criminal investigations and the reports fully describe any physical, testimonial, and documentary evidence gathered, considered, or relied on. When it is practical, copies of documentary evidence are attached to the report. Substantiated criminal investigations are referred for prosecution, when warranted. During the past twelve months, there have not been any allegations of criminal sexual abuse or sexual harassment in the Clearwater County Jail to investigate.

115.71(i) All written reports referenced in 115.71(f and g) are retained for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

115.71(j) If an alleged abuser or victim leaves the facility or the employ of the agency, the investigation will continue and will not be terminated until it is officially closed with a determination.

115.71(l) When outside law enforcement investigators are assigned to an investigation, the Clearwater County Sheriff's Office and Clearwater County Jail will cooperate fully with the investigators and will stay informed as to the progress of the investigation.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Interview with a Clearwater County Criminal Investigator
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator
NIC Online Course, "Investigating Sexual Abuse in a Confinement Setting"
PREA Resource Center Classroom Course, "Investigating Sexual Abuse in a Confinement Setting."

Standard 115.72: Evidentiary standard for administrative investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.72 (a)

- Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.72(a) Clearwater County Jail's IPREA Policy requires the Clearwater County Sheriff's Office to impose no standard higher than a preponderance of evidence in determining whether allegations of sexual abuse or sexual harassment in administrative investigations are substantiated. An interview with an investigator confirmed that this is the standard of determination of substantiation.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Interview with investigator
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator

Standard 115.73: Reporting to inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.73 (a)

- Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded? ☒ Yes ☐ No

115.73 (b)

- If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.) ☒ Yes ☐ No ☐ NA

115.73 (c)

- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The staff member is no longer posted within the inmate's unit? ☒ Yes ☐ No
- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The staff member is no longer employed at the facility? ☒ Yes ☐ No
- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility? ☒ Yes ☐ No
- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? ☒ Yes ☐ No

115.73 (d)

- Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility? ☒ Yes ☐ No

- Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?
☒ Yes ☐ No

115.73 (e)

- Does the agency document all such notifications or attempted notifications? ☒ Yes ☐ No

115.73 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- ☒ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☐ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.73(a) The Clearwater County Jail's IPREA Policy requires, upon completion of any administrative or criminal investigation of sexual abuse or sexual harassment in the facility, the facility will inform the inmate as to whether the allegation was determined to be substantiated, unsubstantiated, or unfounded.

115.73(b) When an outside agency is brought in for an investigation, the inmate will be notified of the outcome, when it is known.

115.73(c) Clearwater County Jail's Policy 18.7 requires that the inmate is notified whenever:

1. The staff member is no longer posted in the inmate's unit;
2. The staff member is no longer employed at the jail;

115.73(d) Clearwater County Jail's IPREA Policy requires that all notifications to inmates described under this standard are documented.

115.73(e) The Clearwater County Jail's obligation to report under this standard terminates if the inmate is released from the facility before the investigation has been completed.

There was one allegation and investigation of a staff member allegedly being involved in sexual harassment misconduct during the twelve months prior to the audit and the allegation was determined to be unfounded. The Jail Administrator wrote a letter to the inmate who was in another jail at the time of the determination to notify the inmate of the outcome. The auditor finds that the Clearwater County Jail exceeds in this part of the standard as the inmate was no longer incarcerated in the Jail and the Jail Administrator went beyond policy to ensure the inmate knew the outcome.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets and exceeds the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator

DISCIPLINE

Standard 115.76: Disciplinary sanctions for staff

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.76 (a)

- Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies? ☒ Yes ☐ No

115.76 (b)

- Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse? ☒ Yes ☐ No

115.76 (c)

- Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories? ☒ Yes ☐ No

115.76 (d)

- Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies (unless the activity was clearly not criminal)? ☒ Yes ☐ No
- Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.76(a - c) Clearwater County Jail's IPREA Policy requires any staff member found in violation of the agency sexual abuse or sexual harassment policies is subject to progressive discipline which includes sanctions up to and including termination. Progressive discipline considers the circumstances, the staff member's disciplinary history, and sanctions imposed for comparable offenses by other staff with similar histories when imposing sanctions. Termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse of an inmate.

115.76(d) All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to any relevant licensing bodies. All terminations and resignations are reported to Idaho P.O.S.T and, if the case involves possible criminal charges, an investigation is done by Idaho P.O.S.T as well.

The Clearwater County Jail reports that in the past twelve months, there has been no staff member from the facility that has been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies. Additionally, there has been no staff member in the past twelve months that has been disciplined for violations of the agency sexual abuse or sexual harassment policies. There has been no staff member that has been reported to law enforcement, Idaho P.O.S.T., or any other licensing boards for violating agency policies.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator

Standard 115.77: Corrective action for contractors and volunteers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.77 (a)

- Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates? ☒ Yes ☐ No
- Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)? ☒ Yes ☐ No
- Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies? ☒ Yes ☐ No

115.77 (b)

- In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.77(a) The Clearwater County Jail's IPREA Policy prohibits contractors and volunteers who have engaged in sexual abuse from having contact with inmates. Violations are reported to any relevant licensing boards and if the abuse was criminal, the Clearwater County Sheriff's Office will seek prosecution.

115.77(b) In any violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, the agency will take appropriate remedial measures and will consider whether the volunteer or contractor will be retained, dismissed or prohibited from contact with inmates.

The Clearwater County Jail reported that there were no contractors or volunteers who were alleged to have violated the agency's sexual abuse or sexual harassment policies during the past twelve months.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator

Standard 115.78: Disciplinary sanctions for inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.78 (a)

- Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process? ☒ Yes ☐ No

115.78 (b)

- Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories? ☒ Yes ☐ No

115.78 (c)

- When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior? ☒ Yes ☐ No

115.78 (d)

- If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits? ☒ Yes ☐ No

115.78 (e)

- Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact? ☒ Yes ☐ No

115.78 (f)

- For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation? ☒ Yes ☐ No

115.78 (g)

- Does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)
☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.78(a) The Clearwater County Jail has in place a comprehensive progressive inmate disciplinary process for rule and law violations by inmates. A formal disciplinary process will be given to inmates who have been found guilty in an administrative or criminal investigation of inmate-on-inmate sexual abuse or inmate-on-inmate sexual harassment.

115.78(b) If the inmate is found guilty in the disciplinary hearing, the sanctions imposed will consider the circumstances of the incident, the disciplinary history of the inmate, and the sanctions imposed on others for similar violations.

The Clearwater County Jail reported that during the past twelve months, no allegations of inmate-on-inmate sexual abuse or sexual harassment were reported and, therefore, no disciplinary hearings were conducted for this offense.

115.78(c) Clearwater County Jail's IPREA Policy requires that the disciplinary process considers whether an inmate's mental disabilities or mental illness contributed to the behavior when determining what type of sanctions, if any, should be imposed.

115.78(d) The facility does not provide therapy, counseling, or other interventions for inmate abusers.

115.78(e) The Clearwater County Jail has no policy that states it will discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact. Therefore, the auditor finds that the Clearwater County Jail does not meet this part of the standard.

The Clearwater County Jail reported that there were no instances of this type of sexual abuse during the past twelve months.

115.78(f) Clearwater County Jail does not have a policy prohibiting discipline for an inmate filing a false report of sexual abuse when the inmate believed the incident actually happened and filed the report in good faith. Therefore, the auditor finds that the Clearwater Jail does not meet this part of the standard.

115.78(f) Agency policy prohibits all sexual activity between inmates but has no policy that deems such activity sexual abuse unless it is determined that the activity was coerced. Therefore, the auditor finds that the Clearwater County Jail does not meet this part of the standard.

The Clearwater County Jail reported that, during the past twelve months, there were no incidences of coerced sexual activity between inmates.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Inmate Rules and Disciplinary Process
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator

CORRECTIVE ACTION REQUIRED:

1. The Clearwater County Jail should add to policy that it will discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact.

2. The Clearwater County Jail should add to policy that it will not discipline an inmate for filing a false report of sexual abuse when the inmate believed the incident actually happened and filed the report in good faith.
3. The Clearwater County Jail should add to policy that it prohibits all sexual activity between inmates but does not deem such activity sexual abuse unless it is determined that the activity was coerced.

The revised policy should be sent to the auditor within 180 days of the date of this interim report.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

On April 14, 2020, the Clearwater County Jail sent the auditor verification and copies of documentation that the corrective action noted in the interim report has been corrected as follows:

1. The Clearwater County Jail has added to policy that it will discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact.
2. The Clearwater County Jail has added to policy that it will not discipline an inmate for filing a false report of sexual abuse when the inmate believed the incident actually happened and filed the report in good faith.
3. The Clearwater County Jail has added to policy that it prohibits all sexual activity between inmates but does not deem such activity sexual abuse unless it is determined that the activity was coerced.

The auditor has reviewed all of the documents that were sent and the Clearwater County Jail is now fully compliant with this standard.

MEDICAL AND MENTAL CARE

Standard 115.81: Medical and mental health screenings; history of sexual abuse

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.81 (a)

- If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)
☒ Yes ☐ No ☐ NA

115.81 (b)

- If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.) ☒ Yes ☐ No ☐ NA

115.81 (c)

- If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? ☒ Yes ☐ No

115.81 (d)

- Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?
☒ Yes ☐ No

115.81 (e)

- Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.81(a and c) When an inmate discloses sexual abuse either at an institutional facility or in a community setting, Clearwater County Jail's IPREA Policy requires the staff member receiving the information offer a follow-up meeting with the Medical Provider to the inmate within 14 days. The Jail reported that it offers the follow-up counseling to every inmate who discloses sexual abuse at intake. The auditor looked at the screening forms and could not find any instances where an inmate disclosed this information. The policy states that this will be offered to an inmate who discloses sexual abuse at an institutional facility or in the community but the screening form only asks if the inmate has been sexually abused in an institution. Therefore, the auditor finds that the Clearwater County Jail does not meet this part of the standard.

115.81(d) Information related to sexual victimization that occurred in an institutional setting is not strictly limited to medical and mental health providers. After booking, the information shared with staff is strictly limited to informing security and management decisions, including treatment plans, housing, work, bed, education, and program assignments. All detention staff have access to the screening forms as they all classify inmates for housing and programs.

115.81(e) An interview with the Medical Provider verified that informed consent disclosures, when needed, are provided on-site by the Medical Providers.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Intake Risk Assessment Form
Interview with Medical Provider
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator

CORRECTIVE ACTION REQUIRED:

1. The Clearwater County Jail should add to its screening form the term “community” along with “institution” in question #6.

The revised screening form should be sent to the auditor within 180 days of the date of this interim report.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

On April 14, 2020, the Clearwater County Jail sent the auditor verification and copies of documentation that the corrective action noted in the interim report has been corrected as follows:

1. The Clearwater County Jail has changed the screening form to ask the inmate if they have ever been the victim of a sexual assault.

The auditor has reviewed all of the documents that were sent and the Clearwater County Jail is now fully compliant with this standard.

Standard 115.82: Access to emergency medical and mental health services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.82 (a)

- Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?
☒ Yes ☐ No

115.82 (b)

- If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62? ☒ Yes ☐ No
- Do security staff first responders immediately notify the appropriate medical and mental health practitioners? ☒ Yes ☐ No

115.82 (c)

- Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate? ☒ Yes ☐ No

115.82 (d)

- Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?
☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.82(a) An interview with the Mental Health Provider confirmed that inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The Clearwater County Jail reported there were no inmate victims of sexual abuse in the last twelve months who needed emergency care so the auditor had no medical records to review.

115.82(b) If no Medical Providers are on duty in the Clearwater County Jail at the time a report of recent sexual abuse, the First Responder will take preliminary steps to protect the inmate and will immediately notify the appropriate Medical Providers and EMT's, if needed. When necessary, all victims are transported to the Clearwater Valley Hospital, Orofino, Idaho where SAFE or SANE exams are conducted. According to policy, the staff will also contact the YWCA and the inmate is offered a victim's advocate to accompany them through the exam and subsequent investigation.

115.82(c) The Medical Provider confirmed that inmate victims of sexual abuse are offered information about, and timely access to, emergency contraception and sexually transmitted infections prophylaxis, when appropriate. The Clearwater County Jail reported there haven't been any instances during the past twelve months where inmates have needed this information or care.

15.82(d) In all circumstances of sexual abuse within the facility, treatment and advocates are provided to the victim inmate free of charge.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Interview with the Medical Provider
Interview with Lt Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator

Standard 115.83: Ongoing medical and mental health care for sexual abuse victims and abusers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.83 (a)

- Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility? ☒ Yes ☐ No

115.83 (b)

- Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody? ☒ Yes ☐ No

115.83 (c)

- Does the facility provide such victims with medical and mental health services consistent with the community level of care? ☒ Yes ☐ No

115.83 (d)

- Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.) ☒ Yes ☐ No ☐ NA

115.83 (e)

- If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if all-male facility.) ☒ Yes ☐ No ☐ NA

115.83 (f)

- Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate? ☒ Yes ☐ No

115.83 (g)

- Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?
☒ Yes ☐ No

115.83 (h)

- If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)
☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.83(a - c) Clearwater County Jail's IPREA Policy requires health evaluations and, as appropriate, treatment to all inmates who have been sexually abused in any correctional institution. The Medical Provider confirmed that the care is consistent with the community level of care. Policy states the Jail will offer referrals to the inmate for continuing care, when necessary, when the inmate leaves the facility. However, they will not make the appointment for the inmate. The Clearwater County Jail reported that, during the past twelve months, there have been no inmates that have requested referrals for continuing care upon release from the facility.

115.83(d -e) The Medical Provider confirmed that female inmate victims of sexual abuse are offered pregnancy tests and information about timely access to all lawful pregnancy related medical services. The Medical Provider also confirmed that inmates who have been sexually abused are offered tests for sexually transmitted infections, as medically appropriate. Medical Providers will provide ongoing treatment to inmates, when needed.

115.83(f) In all circumstances of sexual abuse within the facility, treatment and advocates are provided to the victim inmate free of charge.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Interview with the Medical Provider
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator

DATA COLLECTION AND REVIEW

Standard 115.86: Sexual abuse incident reviews

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.86 (a)

- Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded? ☒ Yes ☐ No

115.86 (b)

- Does such review ordinarily occur within 30 days of the conclusion of the investigation? ☒ Yes ☐ No

115.86 (c)

- Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners? ☒ Yes ☐ No

115.86 (d)

- Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse? ☒ Yes ☐ No
- Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility? ☒ Yes ☐ No
- Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse? ☒ Yes ☐ No
- Does the review team: Assess the adequacy of staffing levels in that area during different shifts? ☒ Yes ☐ No
- Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff? ☒ Yes ☐ No
- Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1) - (d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager? ☒ Yes ☐ No

115.86 (e)

- Does the facility implement the recommendations for improvement, or document its reasons for not doing so? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.86(a) Clearwater County Jail's IPREA Policy requires that a review team will review each incident of sexual abuse or sexual harassment that was investigated in the facility, unless the incident is unfounded.

115.86(b - e) The Review Team consists of the IPREA Coordinator, Jail Administrator, Detective, Medical Provider and any other persons relevant to the investigation. The review occurs within 30 days of the incident. Recommended improvements are discussed and submitted to the Chief Deputy who will initiate the improvements or document the reason for not doing so. The Clearwater County Jail reports that there have been no incident reviews done at the time of the audit.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman

Standard 115.87: Data collection

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.87 (a)

- Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions? ☒ Yes ☐ No

115.87 (b)

- Does the agency aggregate the incident-based sexual abuse data at least annually? ☒ Yes ☐ No

115.87 (c)

- Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice? ☒ Yes ☐ No

115.87 (d)

- Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews? ☒ Yes ☐ No

115.87 (e)

- Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.) ☐ Yes ☐ No ☒ NA

115.87 (f)

- Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.) ☐ Yes ☐ No ☒ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.87(a and c) Clearwater County Jail's IPREA Policy requires that the agency collect accurate, uniform data for every allegation of sexual abuse at the facility and use a standardized instrument and set of definitions. The data collected will include, at a minimum, the data necessary to answer all of the questions from the most recent version of the Survey of Sexual Violence. While the policy says this will be done, the Clearwater County Jail does not have a standardized instrument in place. Therefore, the auditor finds the Clearwater County Jail does not meet this standard.

115.87(b) Policy directs the IPREA Coordinator to aggregate the data annually and prepare a report.

115.87(d) The Clearwater County Jail policy and practice require the collection of the data in accordance with this standard. The facility will create the annual report in January of each year for the previous calendar year. The Clearwater County Jail has not had any incidents of sexual abuse during the year prior to the audit and, therefore, has not written an annual report.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta,
Interview with Sheriff Chris Goetz
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator

CORRECTIVE ACTION REQUIRED:

1. The Clearwater County Jail should develop a standardized instrument to collect data of sexual abuse at the facility.

When the corrective action has been completed, the Clearwater County Jail will send a copy of the form to the auditor within 180 days of the date of this interim report.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

On April 14, 2020, the Clearwater County Jail sent the auditor verification and copies of documentation that the corrective action noted in the interim report has been corrected as follows:

1. The Clearwater County Jail will use the actual survey form for Survey of Sexual Violence to collect their sexual abuse data.

The auditor has reviewed all of the documents that were sent and the Clearwater County Jail is now fully compliant with this standard.

Standard 115.88: Data review for corrective action

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.88 (a)

- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas? ☐ Yes ☐ No
- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis? ☐ Yes ☐ No
- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole? ☐ Yes ☐ No

115.88 (b)

- Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse ☐ Yes ☐ No

115.88 (c)

- Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means? ☐ Yes ☐ No

115.88 (d)

- Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility? ☐ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☐ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This standard deleted for IPREA

Standard 115.89: Data storage, publication, and destruction

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.89 (a)

- Does the agency ensure that data collected pursuant to § 115.87 are securely retained?
☒ Yes ☐ No

115.89 (b)

- Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means? ☒ Yes ☐ No

115.89 (c)

- Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available? ☒ Yes ☐ No

115.89 (d)

- Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.89(a - b) Clearwater County Jail 's IPREA Policy requires that data collected according to this standard is securely retained and will maintain sexual abuse data for at least 10 years after the date of the initial collection. The data is saved on the IPREA Coordinator's desktop.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Clearwater County Jail's IPREA Policy
Completed Pre-Audit Questionnaire submitted by Lt. Sheri Busta
Interview with Sheriff Chris Goetz
Interview with Lt. Sheri Busta, Jail Administrator
Interview with Cpl. Ryan Spiekerman, IPREA Coordinator

AUDITING AND CORRECTIVE ACTION

Standard 115.401: Frequency and scope of audits

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.401 (a)

- During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (*Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.*) ☐ Yes ☒ No

115.401 (b)

- Is this the first year of the current audit cycle? (*Note: a "no" response does not impact overall compliance with this standard.*) ☒ Yes ☐ No
- If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is **not** the *second* year of the current audit cycle.) ☐ Yes ☒ No ☐ NA
- If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is **not** the *third* year of the current audit cycle.) ☐ Yes ☒ No ☐ NA

115.401 (h)

- Did the auditor have access to, and the ability to observe, all areas of the audited facility?
☒ Yes ☐ No

115.401 (i)

- Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)? ☒ Yes ☐ No

115.401 (m)

- Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?
☒ Yes ☐ No

115.401 (n)

- Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.401(a-b) The audit conducted on September 16 - 18, 2019 is the first audit for the Clearwater County Jail. The first audit is an IPREA audit rather than a PREA audit.

115.401(h, l, m, n) The auditor had access to, and the ability to observe, all areas of the audited facility and was permitted to request and receive copies of any relevant documents (including electronically stored information). The auditor was permitted to conduct private interviews with inmates and inmates were permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel.

Standard 115.403: Audit contents and findings

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.403 (f)

- The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or in the case of single facility agencies that there has never been a Final Audit Report issued.) ☐ Yes ☐ No ☒ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The auditor finds that the Clearwater County Jail is fully compliant in all of the PREA standards. The auditor reviewed policies and procedures, supporting documentation, inmate records, staff records, PREA investigation reports, training curriculums, risk screenings, classification records, and many more documents. The auditor also relied on random staff, specialty staff, special population inmates, and random inmate confidential interviews.

The auditor has written a comprehensive description in the report of what was relied on to find the standards in compliance.

AUDITOR CERTIFICATION

I certify that:

- ☒ The contents of this report are accurate to the best of my knowledge.
- ☒ No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- ☒ I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

Auditor Instructions:

Type your full name in the text box below for Auditor Signature. This will function as your official electronic signature. Auditors must deliver their final report to the PREA Resource Center as a searchable PDF format to ensure accessibility to people with disabilities. Save this report document into a PDF format prior to submission.¹ Auditors are not permitted to submit audit reports that have been scanned.² See the PREA Auditor Handbook for a full discussion of audit report formatting requirements.

Cynthia Malm

April 20, 2020

Auditor Signature

Date

¹ See additional instructions here: <https://support.office.com/en-us/article/Save-or-convert-to-PDF-d85416c5-7d77-4fd6-a216-6f4bf7c7c110>.

² See *PREA Auditor Handbook*, Version 1.0, August 2017; Pages 68-69.